BEFORE THE

INDEPENDENT CITIZENS' OVERSIGHT COMMITTEE TO THE CALIFORNIA INSTITUTE FOR REGENERATIVE MEDICINE ORGANIZED PURSUANT TO THE CALIFORNIA STEM CELL RESEARCH AND CURES ACT

REGULAR MEETING

LOCATION: STATE CAPITOL BUILDING

ROOM 4202

SACRAMENTO, CALIFORNIA

DATE: MARCH 11, 2010

9:30 A.M.

REPORTER: BETH C. DRAIN, CSR

CSR. NO. 7152

BRS FILE NO.: 86432

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	DARRISTERS REPORTING SERVICE
1	SACRAMENTO, CALIFORNIA; THURSDAY, MARCH 11, 2010
2	09:50 AM
3	
4	CHAIRMAN KLEIN: THANK YOU VERY MUCH. MY
5	NAME IS BOB KLEIN. I'M CHAIRMAN OF THE GOVERNING
6	BOARD OF THE CALIFORNIA INSTITUTE OF REGENERATIVE
7	MEDICINE ESTABLISHED BY PROPOSITION 71, AND WE GIVE
8	OUR THANKS TO 7 MILLION VISIONARY CALIFORNIA VOTERS
9	EVERY TIME WE MEET.
10	I'D LIKE TO HAVE MELISSA KING LEAD US IN
11	THE PLEDGE OF ALLEGIANCE FOLLOWED BY THE ROLL CALL.
12	(THE PLEDGE OF ALLEGIANCE.)
13	MS. KING: RICARDO AZZIZ. ROBERT
14	BIRGENEAU. FLOYD BLOOM. GORDON GILL FOR DAVID
15	BRENNER.
16	DR. GILL: PRESENT.
17	MS. KING: KIM WITMER FOR DR. BRODY.
18	DR. WITMER: PRESENT.
19	MS. KING: JACOB LEVIN FOR SUSAN BRYANT.
20	DR. LEVIN: HERE.
21	MS. KING: MARCY FEIT. MICHAEL FRIEDMAN.
22	DR. FRIEDMAN: HERE.
23	MS. KING: LEEZA GIBBONS.
24	MS. GIBBONS: HERE.
25	MS. KING: MICHAEL GOLDBERG.
	3

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ı	Diminstens her offing service
1	MR. GOLDBERG: HERE.
2	MS. KING: SAM HAWGOOD.
3	DR. HAWGOOD: HERE.
4	MS. KING: BOB KLEIN.
5	CHAIRMAN KLEIN: HERE.
6	MS. KING: SHERRY LANSING.
7	MS. LANSING: HERE.
8	MS. KING: GERALD LEVEY. EXCUSE ME. DR.
9	DAFOE FOR GERALD LEVEY.
10	DR. DAFOE: FOR AZZIZ.
11	MS. KING: I'M SORRY. DONALD DAFOE FOR
12	RICARDO AZZIZ. THAT'S WHY I WAS CONFUSED. THANK
13	YOU. AND YOU'RE PRESENT.
14	TED LOVE.
15	DR. LOVE: HERE.
16	MS. KING: ED PENHOET. PHIL PIZZO.
17	CLAIRE POMEROY.
18	DR. POMEROY: HERE.
19	MS. KING: FRANCISCO PRIETO.
20	DR. PRIETO: HERE.
21	MS. KING: CARMEN PULIAFITO.
22	DR. PULIAFITO: HERE.
23	MS. KING: ROBERT QUINT.
24	DR. QUINT: HERE.
25	MS. KING: JEANNIE FONTANA FOR JOHN REED.
	4
	4

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1	DR. FONTANA: HERE.
2	MS. KING: DUANE ROTH.
3	MR. ROTH: HERE.
4	MS. KING: JOAN SAMUELSON.
5	MS. SAMUELSON: HERE.
6	MS. KING: DAVID SERRANO-SEWELL. JEFF
7	SHEEHY.
8	MR. SHEEHY: HERE.
9	MS. KING: JON SHESTACK, ARE YOU ON THE
10	LINE? OSWALD STEWARD. AND ART TORRES.
11	MR. TORRES: HERE.
12	MS. KING: AND WE DO HAVE A QUORUM.
13	ANYONE JOINING BY PHONE, IF YOU COULD
14	PLEASE PUT YOUR PHONES ON MUTE SO WE DON'T GET THE
15	FEEDBACK THAT WE'RE GETTING, THAT WOULD BE HELPFUL
16	TO THE PROCEEDINGS. THANK YOU.
17	CHAIRMAN KLEIN: ALL RIGHT. THANK YOU
18	VERY MUCH, MELISSA KING. YOU ALWAYS HAVE A
19	MIRACULOUS EXECUTION TO GET THESE EXTRAORDINARY
20	LEADERS THAT MAKE UP THIS BOARD FROM ALL OVER THE
21	STATE AND BRING US TOGETHER FOR OUR MEETINGS.
22	I WANT TO THANK THE LEGISLATURE FOR
23	ALLOWING US TO BE HERE IN THE STATE CAPITOL IN THEIR
24	HEARING ROOMS TODAY. EVERY YEAR WE COME BACK TO THE
25	CAPITOL TO ANSWER QUESTIONS OF LEGISLATORS, TO TALK

1	ABOUT THE RESEARCH BEING DONE BY THE PHENOMENALLY
2	COMMITTED PHYSICIANS AND CLINICIANS IN THE STATE.
3	IT IS A GREAT PRIVILEGE TO SERVE THE STATE OF
4	CALIFORNIA TO GET CONTINUING INPUT FROM THE
5	LEGISLATURE WHO HAS EXERCISED OVERSIGHT AND
6	LEGISLATIVE AUDITS THAT WE HAVE PERFORMED EXTREMELY
7	WELL ON, AND WE ARE VERY PROUD OF THAT RECORD.
8	IN BEGINNING THE MEETING THIS MORNING, I
9	WOULD LIKE TO MAKE CERTAIN THAT WE GIVE THANKS TO
10	ART TORRES, FORMER STATE SENATOR, WHO IS OUR VICE
11	CHAIR, FOR HIS WORK AND HIS ASSISTANT NICK WARSHAW
12	IN PULLING TOGETHER MEETINGS IN THE CAPITOL.
13	I'D LIKE TO THANK JENNIFER PRYNE AND
14	MELISSA KING AND AMY CHUNG FOR THEIR WORK IN PULLING
15	TOGETHER THIS, AND JOAN SAMUELSON FOR YOUR VERY
16	SPECIAL EFFORT IN JOINING US BY PHONE TODAY.
17	THE BEGINNING OF THIS MEETING WILL FOCUS
18	ON THE PHENOMENAL OPENING WE HAD YESTERDAY OF THE
19	FIRST INSTITUTE IN CALIFORNIA, A CENTER OF
20	EXCELLENCE AT THE UC DAVIS CAMPUS. WE HAVE A
21	PHENOMENAL PIECE OF COVERAGE THAT OCCURRED IN THE
22	SACRAMENTO BEE FRONT PAGE ABOVE THE COVER, BACK
23	PAGE, PROPER ATTENTION TO REALLY AN EXTRAORDINARY
24	FACILITY DEDICATED TO THE ADVANCEMENT OF MEDICAL
25	RESEARCH FOR CALIFORNIA, FOR THE COUNTRY, AND FOR
	6

1	THE PLANET. IT WAS A PRIVILEGE TO BE THERE
2	YESTERDAY.
3	WHAT I'D LIKE TO DO IN OPENING IS JUST
4	REMIND THE BOARD AND THE COMMUNITY OF THE
5	EXCEPTIONAL RESEARCHERS THAT ARE RECIPIENTS OF CIRM
6	GRANTS BECAUSE WE HAVE TREMENDOUS DEPTH AT THE UC
7	DAVIS FACILITY. JAN NOLTA, WHO YOU HEARD FROM IN A
8	TREMENDOUS DEDICATED PROGRAM SPOTLIGHT THIS MORNING
9	TO HUNTINGTON'S DISEASE, LEADS THE STEM CELL CENTER.
10	SHE IS RECIPIENT OF, IN FACT, A CIRM GRANT THAT
11	ALLOWS HER, AS SHE SAID IN HER SPOTLIGHT, TO ADVANCE
12	THE RESEARCH FOR HUNTINGTON'S DISEASE. SHE DOES NOT
13	HAVE OTHER GOVERNMENTAL FUNDING TO BREAK THE CODE ON
14	THIS DEADLY DISEASE.
15	ALICE TARANTAL IS FOCUSING ON KIDNEYS.
16	SHE'S USING CORD BLOOD AND HUMAN EMBRYONIC STEM
17	CELLS.
18	DR. ZHAO IS USING HUMAN EMBRYONIC STEM
19	CELLS IN HIS RESEARCH, AND HE HAS A THREE-YEAR CIRM
20	GRANT. HE'S LOOKING AT ELECTRICAL FIELDS AND THE
21	MIGRATION OF ELECTRICAL CHARGES IN HUMAN STEM CELLS.
22	DR. LAMB RECEIVED A HUMAN EMBRYONIC STEM
23	CELL GRANT AND AN IPS CELL GRANT. HE'S LOOKING AT
24	SYNTHETIC CHEMICAL MOLECULES THAT BIND TO UNIQUE
25	RECEPTORS, PROTEIN MOLECULES ON THE SURFACE OF THOSE

1	HUMAN EMBRYONIC STEM CELLS. HE IS HIGHLY FOCUSED ON
2	THE BIOMECHANICS OF STEM CELLS AS A CLUE TO LYMPHOMA
3	AND OTHER CANCERS.
4	PAUL KNOEPFLER, DR. PAUL KNOEPFLER IS A
5	RECIPIENT ONE OF OUR GRANTS. HE IS A NEW FACULTY
6	AWARD RECIPIENT, AND HE SPECIALIZES IN STEM CELL AND
7	CANCER-RELATED RESEARCH.
8	DR. PAN HAS FOCUSED HIS WORK ON OVERCOMING
9	LEUKEMIA. HE IS AN M.D./PH.D. THAT REALLY HAS
10	IDENTIFIED MOLECULES THAT SPECIFICALLY RECOGNIZE
11	CANCER STEM CELLS.
12	DR. ZERN IS USING HUMAN EMBRYONIC STEM
13	CELLS. HE'S GENERATING HEPATOCYTES FOR CONTROL OF
14	LIVER DISEASE. HE'S INTERNATIONALLY KNOWN FOR HIS
15	WORK IN EGYPT DEALING WITH LIVER DISEASE.
16	DR. YAMOAH, WE'VE HEARD A SPOTLIGHT FROM
17	HIM ALMOST TWO YEARS AGO ON REGENERATING THE INNER
18	EAR HAIR-LIKE SENSORY CELLS THAT ALLOW US TO HEAR.
19	CRITICAL WORK RECENTLY PUBLISHED IN THE PROCEEDINGS
20	OF THE NATIONAL ACADEMY OF SCIENCES AND A GRANT
21	RECIPIENT.
22	THIS IS A STORY REPEATED AROUND THE STATE.
23	AS WE GO THROUGH 2009, WE WILL HAVE 2010 WE WILL
24	HAVE NINE OPENINGS OF INSTITUTES AND CENTERS OF
25	EXCELLENCE IN CALIFORNIA. IN THIS VOLATILE

1	FINANCIAL ENVIRONMENT, THAT IS AN INCREDIBLE RECORD,
2	ON-TIME OPENINGS, IN BUDGET. IN FACT, I'M LOOKING
3	AT DR. LEVIN. THEY WERE ABLE TO NEGOTIATE AT UC
4	IRVINE AN ENTIRE NEW FLOOR, AN ADDITIONAL FLOOR
5	WITHIN THEIR BID AND WITHIN BUDGET. SO IT'S A
6	TREMENDOUS BONUS TO THE STATE OF CALIFORNIA AND
7	MEDICAL RESEARCH.
8	BUT THE INDIVIDUAL SCIENTISTS ARE THE ONES
9	THAT ARE CHANGING THE FUTURE OF STEM CELL RESEARCH,
10	CREATING THE HOPE TO REDUCE HUMAN SUFFERING. IT
11	WILL TAKE US MANY YEARS, BUT WE NEED, AS REFLECTED
12	IN THESE SCIENTISTS I'VE HIGHLIGHTED WHO ARE CIRM
13	RECIPIENTS, THE ENTIRE SPECTRUM OF CELLULAR
14	RESEARCH. WE NEED EMBRYONIC STEM CELL RESEARCH, BUT
15	WE NEED MESENCHYMAL CELLS, WE NEED THE WHOLE RANGE
16	OF ADULT STEM CELLS, WE NEED CORD BLOOD CELLS, WE
17	NEED IPS CELLS. EACH OF THE THERAPEUTIC APPROACHES
18	MAY FIND THAT A DIFFERENT CELL TYPE IS APPROPRIATE
19	TO IT. AND I WANT TO EMPHASIZE THAT THAT'S
20	REFLECTED IN EACH OF OUR RESEARCH RECIPIENT
21	INSTITUTIONS, WHETHER IN THE PRIVATE SECTOR OR IN
22	THE PUBLIC SECTOR.
23	I'D LIKE TO ALSO INDICATE THAT ON-TIME
24	CONSTRUCTION, IN-BUDGET CONSTRUCTION, EXTRAORDINARY
25	COMPLEX CONSTRUCTION ONLY HAPPENS WITH DEDICATED

1	WORKFORCE. THAT WORKFORCE IN CALIFORNIA UNDER
2	PROPOSITION 71 IS A UNION WORKFORCE AS SPECIFIED IN
3	PROPOSITION 71 WHERE WE SPECIFY ESSENTIALLY
4	PREVAILING WAGE REQUIREMENTS.
5	AND WE HAVE SOME GREAT LEADERS FROM THAT
6	UNION WORKFORCE IN CALIFORNIA HERE WITH US TODAY WHO
7	WORK ON THE ACTUAL CONSTRUCTION OF THESE NINE
8	FACILITIES THAT WILL BE COMPLETED THIS YEAR. AND SO
9	IT IS A GREAT PRIVILEGE TO HAVE THEM ACCOMPANYING
10	US.
11	I'M GOING TO HAVE ART TORRES DO THOSE
12	INTRODUCTIONS. I WOULD LIKE TO SAY THAT WE HAVE A
13	COMPLETED STUDY THAT SHOWS OF APPROXIMATELY 100,000
14	JOBS THAT OUR GRANTS APPROVED TO DATE WILL GENERATE
15	OR HAVE GENERATED, WE HAVE ABOUT 13,000 OF THOSE IN
16	THE CONSTRUCTION OF THESE HUGE FACILITIES OF
17	TREMENDOUS INTRICACY WHICH RELY UPON EXTREME
18	TRAINING AND PROFICIENCY IN BUILDING TO CARRY OUT
19	THE KIND OF EXQUISITE RESEARCH WE KNOW IS TAKING
20	PLACE IN OUR RESEARCH FACILITIES IN CALIFORNIA. SO
21	WITH THAT, ART TORRES.
22	MR. TORRES: THANK YOU, MR. CHAIRMAN. I
23	WANTED TO THANK DR. POMEROY. AND AS A CAL AGIE
24	ALUM, I FELT SO PROUD YESTERDAY AT THE OPENING OF
25	THE FACILITY AND SO MOVED BY THE PATIENT ADVOCATES

1	AND THE DOCTORS IN THEIR MESSAGES. THANK YOU AGAIN,
2	CLAIRE. IT WAS AN INCREDIBLE, INCREDIBLE DISPLAY OF
3	PERSEVERANCE AND COMMITMENT AND HARD, HARD WORK TO
4	GET IT ON TIME. I UNDERSTAND THAT.
5	PART AND PARCEL OF THE MANY WORKERS, MEN
6	AND WOMEN WHO HAVE WORKED IN BUILDING THESE
7	FACILITIES AND ARE STILL BUILDING THESE FACILITIES,
8	NINE HAVE BROKEN GROUND ALREADY. WE'RE IN THE
9	PROCESS NOW OF MAKING SURE THAT WE AS A BOARD
10	RECOGNIZE THE LEADERSHIP OF LABOR AND THE
11	CONSTRUCTION CONTRACTORS AS WELL. AND I WOULD LIKE
12	TO ASK THE REPRESENTATIVES REPRESENTING ALL OF THE
13	WORKERS, WE COULDN'T BRING EVERY UNION UP HERE, BUT
14	REPRESENTING ALL THE WORKERS, WE FELT IT WAS
15	IMPORTANT TO BRING SOME FOLKS HERE TO HONOR THEM IN
16	THEIR COMMITMENT AS THEY'RE BUILDING THESE NEW
17	FACILITIES FOR THE FUTURE.
18	FIRST OF ALL, MY VERY DEAR FRIEND MIKE
19	MCCARRON, WHO IS THE EXECUTIVE SECRETARY-TREASURER
20	OF THE SOUTHERN CALIFORNIA CARPENTERS. PLEASE COME
21	FORWARD. JAY HANSEN, WHO IS HERE, THE LEGISLATIVE
22	DIRECTOR WHO REPRESENTS ALL OF THE STATE BUILDING
23	AND CONSTRUCTION TRADES COUNCIL OF CALIFORNIA.
24	CURTIS KELLY, DISTRICT MANAGER FROM THE NORTHERN
25	CALIFORNIA CARPENTERS, AND JERRY MORALES, WHO IS THE
	11

1	ASSISTANT REGIONAL DIRECTOR OF THE LABORERS
2	INTERNATIONAL UNION, REPRESENTING ALL THE LABORERS
3	THAT HAVE BEEN WORKING ON THIS PROJECT.
4	AND ALSO FOR THE CONSTRUCTION FROM TURNER
5	CONSTRUCTION, MR. FRANK DAIZOVI, WHO IS THE VICE
6	PRESIDENT AND GENERAL MANAGER. I THINK CLAIRE KNOWS
7	THIS GUY, ROBERT MALDEN, WHO IS THE PROJECT MANAGER
8	OF THE UC DAVIS. IF YOU GENTLEMEN WILL PLEASE COME
9	FORWARD TO THE DAIS. IF YOU COULD COME UP RIGHT
10	BEHIND THE PODIUM, THAT WOULD BE GREAT.
11	GENTLEMEN, WE JUST WANT TO THANK YOU, IT'S
12	SO GOOD TO SEE SO MANY OF YOU AGAIN, FOR THE
13	TREMENDOUS CONTRIBUTIONS THAT YOUR WORKFORCE AND
14	YOUR UNION MEMBERSHIP HAS PROVIDED TO THE PEOPLE OF
15	CALIFORNIA. AND YOU ARE OUR PARTNERS. WE MAY AWARD
16	THE MONEY, BUT YOU HELP BUILD THESE FACILITIES SO
17	THAT SCIENTISTS CAN BEGIN THEIR WORK IN THOSE
18	LABORATORIES ON TIME AS YOU HAVE DONE. SO WE JUST
19	WANTED TO SAY THANK YOU.
20	(APPLAUSE.)
21	MR. TORRES: WE WANT TO PRESENT EACH OF
22	YOU A PLAQUE, WHICH MELISSA HAS. FOR THOSE WHO ARE
23	HERE FROM SOUTHERN CALIFORNIA, WE WILL SHIP IT TO
24	YOU BECAUSE IT'S KIND OF BIG. WE JUST WANTED TO
25	SHOW YOU A SAMPLE OF WHAT YOU WILL BE GETTING.

1	DR. TROUNSON: (OFF MIC) THE IMAGES ARE OF
2	HUNDREDS OF HUMAN EMBRYONIC STEM CELLS IN VARIOUS
3	STAGES OF DIFFERENTIATION INTO NEURONS. SOME OF THE
4	CELLS BECOME NEURONS WHICH ARE BIG AND OTHERS THAT
5	BECOME PRECURSORS OF NERVE CELLS. (INAUDIBLE.) WE
6	HAVE A NUMBER OF THESE REALLY SPECIAL IMAGES
7	AVAILABLE, AND THIS IS A PARTICULARLY GOOD ONE THAT
8	REFLECTS VERY WELL, I THINK, (INAUDIBLE).
9	MR. TORRES: THANK YOU VERY MUCH. WE'LL
10	START WITH MR. MCCARRON JUST TO SAY A FEW WORDS.
11	YOU FLEW ALL THE WAY FROM LOS ANGELES THIS MORNING.
12	(THE FOLLOWING COMMENTS WERE HEARD
13	OFF MIC AND HEREIN INCORPORATED TO THE BEST OF THE
14	REPORTER'S ABILITY TO HEAR THEM:)
15	MR. MC CARRON: ON BEHALF OF THE 63,000
16	MEMBERS OF THE SOUTHWEST REGIONAL COUNCIL, IT WAS AN
17	HONOR TO PERFORM THOSE DUTIES. AND I'M HERE TO
18	HONOR THEIR SKILL AND PRODUCTIVITY.
19	MR. TORRES: THANK YOU VERY MUCH.
20	MR. MC CARRON: THANK YOU FOR HAVING US.
21	MR. TORRES: MR. KELLY.
22	MR. KELLY: SAME THING. IT WAS
23	INTERESTING TODAY. I WAS HERE EARLIER AND WATCHED
24	THE HUNTINGTON'S THING AND REALIZED HOW MANY PAIR OF
25	HANDS IT TAKES TO CONQUER THIS DISEASE AND WHAT

1	AWARDS ARE BEING AWARDED BUILDING THE DISEASE HAS
2	ACTUALLY CONQUERED. AND THEN TO THINK THAT THE
3	CARPENTERS AND THE CONSTRUCTION INDUSTRY BUILDS
4	THOSE BUILDINGS, AND THEY'LL GET THE SAME THING. I
5	GOT TO BUILD THAT BUILDING WHERE THAT DISEASE WAS
6	CURED.
7	MR. TORRES: THANK YOU, CURTIS. MR.
8	HANSEN.
9	MR. HANSEN: ON BEHALF OF THE 350,000
10	MEMBERS OF THE STATE BUILDING TRADES, WE ABSOLUTELY
11	ARE EXCITED TO BE PARTNERS WITH YOU. WE'VE GOT
12	TOUGH ECONOMIC TIMES JUST LIKE EVERYBODY ELSE. JOBS
13	MEAN A LOT TO US. TO BE PARTNERS ON A GREAT PROJECT
14	(INAUDIBLE).
15	MR. TORRES: JERRY.
16	MR. MORALES: I ECHO THE SENTIMENTS ON
17	BEHALF OF THE 800,000 MEMBERS ACROSS THE UNITED
18	STATES AND THOSE PEOPLE IN THE COMMUNITY THAT WILL
19	BENEFIT FROM WHAT YOU GUYS ARE DOING, US INCLUDED.
20	SO THANK YOU SO MUCH FOR HAVING US HERE.
21	MR. TORRES: THANK YOU. GIVE OUR BEST TO
22	ROCCO DAVIS AND TO MR. O'SULLIVAN, YOUR GENERAL
23	PRESIDENT. MR. DAIZOVI.
24	MR. DAI ZOVI: I'LL JUST THANK THE CAMPUS.
25	WITHOUT THE CAMPUS STAFF, QUITE FRANKLY, IT WOULD

1	NOT BE POSSIBLE. THEY WERE GREAT. FANTASTIC TO
2	WORK WITH AND THANK YOU VERY MUCH.
3	MR. TORRES: MR. MALDEN.
4	MR. MALDEN: AGAIN, WORKING WITH THE STAFF
5	AT UC DAVIS, IT WAS MY PLEASURE TO HAVE HANDS ON IN
6	BUILDING THAT PROJECT.
7	MR. TORRES: THANK YOU ALL VERY MUCH
8	AGAIN, GENTLEMEN, AND TO THE MEMBERSHIP OF YOUR
9	UNIONS.
LO	(APPLAUSE.)
L1	CHAIRMAN KLEIN: SO DR. POMEROY.
L2	DR. POMEROY: I WOULD JUST LIKE TO ADD
L3	THAT AS WE BUILT THIS FACILITY AT UC DAVIS, WE
L4	REALIZED THIS WAS A FACILITY UNLIKE ANYTHING THAT
L5	HAS EVER BEEN BUILT BEFORE. THIS IS A ONE-OF-A-KIND
L6	FACILITY. AND WHEN YOU ARE BUILDING SOMETHING BRAND
L7	NEW, YOU HAVE TO HAVE A TEAM THAT'S WILLING TO
L8	REALLY WORK TOGETHER. AND OUR CONSTRUCTION PARTNERS
L9	WERE ABSOLUTELY FANTASTIC IN SAYING, "WE WILL MAKE
20	THIS RIGHT BECAUSE WE UNDERSTAND THE IMPORTANCE OF
21	THIS RESEARCH." AND IT WAS A WONDERFUL PARTNERSHIP,
22	AND WE THANK THEM VERY MUCH.
23	CHAIRMAN KLEIN: SO WE THANK ALL 13,000
24	MEMBERS OF THE WORKFORCE THAT HAS DEDICATED A PART
25	OF THEIR LIFE TO MAKING THIS GREAT RESEARCH
	4.5

1	POSSIBLE. AND WE THANK THE CONTRACTORS AS WELL FOR
2	THEIR DEDICATION AND LEADERSHIP ON THESE
3	TREMENDOUSLY COMPLEX PROJECTS.
4	IT'S ALMOST MIRACULOUS TO SEE THE
5	COORDINATION OF THE SOPHISTICATED BUILDING SYSTEMS
6	THAT MOVE THROUGH THESE FACILITIES FLAWLESSLY
7	WITHOUT MAJOR CHANGE ORDERS, WITHOUT WORK STOPPAGES
8	BECAUSE THEY WERE THOUGHT THROUGH WITH TREMENDOUS
9	INTELLIGENCE, PLANNING, AND COORDINATION. SO THE
10	PARTNERSHIP BETWEEN THE CONTRACTORS THAT ARE SERVING
11	THESE INSTITUTIONS AND THE UNION WORKFORCE HERE
12	TODAY HAS BEEN AN EXQUISITE ONE WHICH WE ARE DEEPLY
13	APPRECIATIVE FOR.
14	I'D LIKE TO MOVE TO A PRESENTATION OF OUR
15	PRESIDENT ALAN TROUNSON FOR THE PRESIDENT'S REPORT.
16	DR. TROUNSON: (OFF MIC) THANK YOU VERY
17	MUCH, CHAIR. AND IN RESPECT TO THE NEW BUILDING
18	CHAIRMAN KLEIN: DR. TROUNSON, IF WE COULD
19	ASK THE TECHNICAL STAFF HERE FOR A MOMENT. WHEN I
20	TURN MY MIC OFF, YOU ARE GETTING THIS LOVELY OUTER
21	SPACE VERSION OF OUR MEETING. SO WHAT WE WILL DO IS
22	IF EVERYONE WILL SPEAK LOUDLY, I'LL KEEP THIS MIC ON
23	BECAUSE I THINK THAT DR. TROUNSON'S PRESENTATION IS
24	MORE ATTRACTIVE TO LISTEN TO THAN THE BACKGROUND
25	SOUNDS.
	16

Т	DR. TROUNSON: THANK YOU, CHAIR.
2	YESTERDAY, HAVING SEEN THAT BUILDING PERHAPS IT WAS
3	SIX YEARS AGO, SEVEN YEARS AGO WHEN I WAS HERE, AND
4	SEEING IT IN THIS STATE, YOU KNOW, FOR A SCIENTIST,
5	ALL I WANT TO DO IS GO BACK TO THE LAB. I MIGHT NOT
6	BE IN THIS JOB TOO LONG.
7	DR. POMEROY: THE JOB OFFER AT UC DAVIS
8	STANDS.
9	DR. TROUNSON: THE OTHER THING THAT, OF
10	COURSE, I HAVE A VIEW THAT THERE WILL BE STEM CELL
11	CLINICS THROUGHOUT THE WORLD, THROUGHOUT CALIFORNIA,
12	AND I THINK THAT THIS NEW INSTITUTE IS JUST PERFECT
13	FOR THAT. IT HAS THE GMP FACILITIES THERE AND HAS
14	THE ABILITY TO BRING PATIENTS IN IN A CLINICAL WAY
15	IN THE FUTURE. I ACTUALLY THINK WE'RE LOOKING AT
16	THE REAL FUTURE OF STEM CELL THERAPIES. SO, YOU
17	KNOW, THAT'S MY VIEW OF THINGS. IT'S NOT ALWAYS
18	I ALWAYS HAVE A BIT OF A RADICAL VIEW OF THINGS, BUT
19	I THINK STEM CELL CLINICS WILL PROLIFERATE. AND I
20	THINK THEY WILL MOVE OUT WITH THESE KINDS OF
21	FACILITIES THAT WE'VE BUILT. THEY'RE FANTASTIC.
22	SO AS USUAL, I'M BEGINNING AND I HOPE YOU
23	CAN SEE, YOU CAN SEE BEHIND ME. I JUST WANT TO
24	BRING TO YOUR ATTENTION THREE STUDIES THAT I'VE SEEN
25	JUST RECENTLY. ONE OF THEM IS ON TELOMERE

1	ELONGATION. IT WAS A PAPER BY GEORGE DALY'S GROUP
2	FROM BOSTON, A VERY IMPORTANT STEM CELL INSTITUTE
3	THERE. GEORGE HAS BEEN A BIG CONTRIBUTOR TO STEM
4	CELL RESEARCH.
5	TELOMERES APPEAR IN THE CHROMOSOMES, AND
6	SO YOU BEGIN WITH A LONG TELOMERE AND EVENTUALLY,
7	DURING CELL DIVISION, THE TELOMERE IS REDUCED. SO
8	ESSENTIALLY WHEN YOU'RE FINISHED OR WHEN THE
9	TELOMERES GET VERY SHORT, THE CELLS BASICALLY DON'T
10	HAVE ANY LIFE LEFT. SO THIS REALLY FORMATS THE LIFE
11	OF THE CELL, THE TELOMERE. AS YOU CHOP IT DOWN TO
12	SUCCESSIVE CELL DIVISION, IN THE END YOU HAVE A CELL
13	WHICH FACES IT CAN'T SURVIVE AND DEGENERATES AND
14	PASSES ON.
15	SO IF YOU HAVE A PATIENT WITH A DISEASE,
16	AND THIS PARTICULAR DISEASE, RESEARCHERS, GEORGE AND
17	HIS COLLEAGUES, WERE LOOKING AT WERE PATIENTS WITH
18	AN X-LINKED GENETIC DISEASE CALLED DYSKERATOSIS
19	CONGENITA, SO DC IN SHORT. THESE MUTATIONS IN THE
20	DYSKERIN GENE THAT ENCODES AN RNA BINDING PROTEIN
21	WHOSE INACTIVATION CAUSES SHORTENING OF THE
22	TELOMERES, THE SHORTENING OF THAT PIECE ON THE END
23	OF THE CHROMOSOME, AND PREMATURE SENESCENCE OF
24	CELLS. SO THEY DIE MORE QUICKLY. THERE'S SHORTER
25	CELL DIVISION, CYCLES OF CELL DIVISION TIME. AND IT
	1 2

Т	OCCURS IN MULTIPLE TISSUES.
2	SO THEY'VE MADE IPS CELLS, THE INDUCED
3	PLURIPOTENTIAL STEM CELLS, FROM DC PATIENTS AND
4	SHOWED THAT THEY REACTIVATE TELOMERASE REVERSE
5	TRANSCRIPTASE, THE TRANSCRIPTION GENE, THE TERT
6	GENE, WHICH OVERCOMES THIS CRITICAL LIMITATION IN
7	THE TELOMERASE RNA COMPONENT, THE TERC COMPONENT.
8	SO WHAT IT DOES, IT ADDS BACK THE TELOMERE
9	LINK TO THE CELLS. IF YOU BRING THEM BACK TO THE
10	PLURIPOTENTIAL STATE, WE KNOW THIS IN EMBRYONIC STEM
11	CELLS, THE TELOMERES RELENGTHEN AGAIN TO THEIR
12	NORMAL LENGTH. SO THIS WAS A QUESTION ABOUT IPS
13	CELLS, DO THEY DO THAT, AND INDEED THEY DO IT.
14	SO THEN YOU'VE GOT NOW A CELL WHICH HAS
15	GOT THE NORMAL LENGTH AGAIN, AND THESE CELLS COULD
16	BE USED IN THERAPEUTIC IMPLICATIONS FOR PATIENTS
17	WITH THIS KIND OF DISEASE. SO IT'S A VERY IMPORTANT
18	STUDY BY THE GROUP.
19	MS. SAMUELSON: THIS IS JOAN. IS IT
20	POSSIBLE FOR ALAN TO SPEAK CLOSER TO THE PHONE MIC?
21	DR. TROUNSON: THE SECOND ONE IS A MUCH
22	MORE BASIC STUDY. IT'S ONE THAT WAS FROM THE WANG
23	AND CHANG LABS AT STANFORD AND PUBLISHED IN GENES $\&$
24	DEVELOPMENT. AND THIS IS ABOUT THE METHYLATION
25	STAGE OF THE HISTONE, THE PROTEIN THAT IS ATTACHED

1	TO THE DNA. EVERYONE THINKS OF DNA AS A NAKED
2	SPIRAL, BUT ESSENTIALLY IT'S ACTUALLY COVERED BY
3	PROTEINS IN A VERY COMPLEX ARRANGEMENT WHICH
4	DICTATES HOW THE GENES ARE ACTUALLY EXPRESSED.
5	SO THEY SHOWED THAT THE TRIMETHYLATION,
6	PUTTING THE THREE METHYL GROUPS OF HISTONE H3 ON LYS
7	27, IS A KEY FOR CELL FATE REGULATION THROUGH GENE
8	SILENCING. SO IF YOU PUT THAT ON THERE, YOU WILL
9	SILENCE THE GENE BECAUSE THERE'S NO WAY THE GENE CAN
10	THEN BE GOT AT TO ACTUALLY TRANSCRIBE. SO IF YOU
11	SILENCE THAT, YOU SILENCE THE POLYCOMB GROUP OF
12	PROTEINS WHICH ARE REALLY RESPONSIBLE FOR CELL FATE
13	AND CELL GROWTH.
14	AND IT'S REALLY IMPORTANT BECAUSE THEY
15	SHOWED THAT THE DEMETHYLASE TARGET GENES, THE UTX,
16	INCLUDES GENES ENCODING FOR RETINOBLASTOMA-BINDING
17	PROTEINS. AND THE UTX REMOVES THIS AND MAINTAINS
18	THE EXPRESSION OF SEVERAL RETINOBLASTOMA-DEPENDENT
19	PATHWAYS WHICH CONSEQUENTLY HAVE INFLUENCE ON CELL
20	FATE.
21	SO THESE ARE BOTH RELATED TO CANCER AND
22	DIFFERENTIATION, NORMAL DIFFERENTIATION, SO YOU'VE
23	GOT AN INTERSECTION HERE BETWEEN CANCER AND CELL
24	DIFFERENTIATION. SO THIS IS REALLY CRITICAL TO THE
2 5	LINDERSTANDING OF DIFFERENTIATION AND CANCER AND

1	THE MANIPULATION HAS REALLY MAJOR THERAPEUTIC
2	IMPLICATIONS FOR REGENERATIVE MEDICINE AND CANCER.
3	THAT'S WHY WE FUND THIS BASIC STEM CELL RESEARCH.
4	THESE KIND OF THINGS WILL HAVE TREMENDOUS IMPACT
5	DOWNSTREAM.
6	THE LAST ONE I WANTED TO SHARE WITH YOU, I
7	HAVE A PERSONAL DEEP HOLE IN MY HEART, SO TO SPEAK,
8	BECAUSE THIS WAS THE AREA I WAS WORKING ON WHEN BOB
9	KLEIN GOT ME TO COME HERE, AND THIS MIGHT HAVE BEEN
10	MY PAPER. YOU DON'T KNOW HOW THAT MAKES YOU FEEL,
11	BUT YOU FEEL PROUD THAT YOU'RE ON THE RIGHT TRACK;
12	BUT ON THE OTHER HAND, I KIND OF WISH IT WAS MY
13	PAPER THAT I WAS BRINGING FORWARD. IT'S A REALLY
14	NICE PAPER PUBLISHED IN A JOURNAL CALLED MOLECULAR
15	THERAPEUTICS.
16	AND IT'S THE TRANSPLANTATION OF HUMAN
17	EMBRYONIC STEM CELL-DERIVED ALVEOLAR NONEPITHELIAL
18	TYPE II CELLS. THESE ARE THE TYPE II CELLS THAT ARE
19	AROUND THE ALVEOLI. THEY'RE VERY THIN. THEY'RE THE
20	ONES RESPONSIBLE FOR OXYGENATING THE BLOOD SYSTEM.
21	NOW, THEY ARE ABLE TO PRODUCE PURE CELLS.
22	THESE ARE ALVEOLI TYPE II CELLS, THEY'RE CALLED ATII
23	CELLS, FROM HUMAN EMBRYONIC STEM CELLS. SO THAT'S A
24	BIG CHALLENGE, AND THEY DID THAT BECAUSE THEY HAD
25	SPC, A SPECIFIC PROTEIN THAT ONLY APPEARS IN THE

Т	LUNGS, ATTACHED TO A NEO CONSTRUCT THAT YOU CAN
2	SELECT FOR, AND THIS TRANSGENE WITH A PROMOTOR
3	SEQUENCE FOR TWO OTHER GENES THAT APPEAR IN THE
4	LUNG, AQUAPORIN-5 AND T1 ALPHA. THESE HAVE A CELL
5	SURFACE MUCIN-LIKE GLYCOPROTEIN. YOU CAN ACTUALLY
6	GET A VERY PURE POPULATION OF TYPE II LUNG CELLS.
7	THEY'VE GOT ALL OF THE CHARACTERISTICS. THAT'S
8	EXACTLY WHAT YOU NEED.
9	THESE ATII CELLS PROLIFERATE IN CULTURE
10	AND INCREASE IN THE PRESENCE OF HUMAN RECOMBINANT
11	KERATINOCYTE GROWTH FACTOR. SO THEY'RE ABLE TO
12	MULTIPLY THESE DRAMATICALLY WITH THAT GROWTH FACTOR.
13	WHEN THEY TRANSPLANTED THOSE CELLS INTO BLEOMYCIN
14	TREATED MICE, BLEOMYCIN DESTROYS THOSE TYPE II CELLS
15	AS TAKEN IN BY THE WIND THROUGH THE NOSE. AND THEN
16	IF YOU GIVE THESE HUMAN CELLS, YOU GET QUITE A
17	DRAMATIC RESPONSE SHOWN IN THESE PICTURES HERE.
18	FIRST OF ALL, IN THE WORK THEY'VE HAD NO
19	TUMORS. THAT'S IMPORTANT. NO TUMORS IN ANY OF THE
20	MICE THEY HAD. THEY DELIVERED THESE CELLS BY
21	TRACHEAL INTUBATION. THEY PUT THEM DOWN THROUGH THE
22	TRACHEA. YOU'VE GOT REGENERATION OF TYPE II ALVEOLI
23	CELLS, YOU HAVE BODY WEIGHT RECOVERY IN THE MICE,
24	YOU HAVE ARTERIAL BLOOD OXYGEN SATURATION, SO IT'S
25	COME BACK TO NORMAL. YOU CAN'T HAVE THAT IF YOU'VE

1	GOT A BLEOMYCIN TREATED MOUSE. DECREASED COLLAGEN
2	DEPOSITION AND INCREASED SURVIVAL.
3	THE BLEOMYCIN IS SHOWN ON THE BLUE BARS.
4	(INTERRUPTION IN AUDIO TRANSMISSION.)
5	DR. TROUNSON: SO THIS, I THINK,
6	DELIVERING CELLS TO HUMANS, THE MOUSE HAS GOT AN
7	EXTREMELY SMALL TRACHEA. IT'S A CHALLENGE. HUMANS
8	HAVE GOT A MUCH BIGGER AIRWAY, SO IT'S A LOT EASIER.
9	BUT YOU CAN ALSO DELIVER THESE CELLS, I BELIEVE,
10	THROUGH THE BLOOD SYSTEM BECAUSE THE BLOOD HAS TO
11	SLOW DOWN WHEN IT GOES THROUGH TO THE LUNG, AND
12	HERE'S A CHANCE TO DRAW IN THOSE CELLS INTO THE LUNG
13	IN A MUCH EASIER WAY.
14	MY PRIORITIES ARE LISTED HERE. I'VE BEEN
15	VERY BUSY ON THE VICE PRESIDENT R&D SEARCH
16	(INAUDIBLE).
17	GRANTEE MEETING WE JUST HAD (INAUDIBLE).
18	IT WAS JUST A BRILLIANT MEETING. (INAUDIBLE).
19	THE DIVERSITY WORKSHOP (INAUDIBLE.) AND
20	ALSO A GERMAN-CALIFORNIA SCIENCE WORKSHOP. (ON MIC)
21	WE'VE BEEN BUSY ON THESE MEETINGS. WE'VE GOT AN
22	ISSCR/CIRM REGULATORY WORKSHOP COMING UP SHORTLY IN
23	JUNE. WE HAVE INTERNATIONAL AND INTERSTATE
24	AGREEMENTS AND PROJECT MONITORING, SO WE'VE BEEN
25	DOING A LOT OF WORK ON OUR INTERSTATE AND
	23

1	INTERNATIONAL PARTNERS. I THINK WE'VE FINALLY NOW
2	GOT AN AGREEMENT WITH THE NEW YORK STEM CELL
3	FOUNDATION, SO WE'VE DRAWN ANOTHER STATE INTO OUR
4	COALITION, IF YOU LIKE, OF COLLABORATIVE PARTNERS.
5	I THINK THAT WAS ANOTHER BIG AND IMPORTANT STEP
6	FORWARD.
7	THERE HAVE BEEN PATENT ISSUES THAT WE'VE
8	BEEN DEALING WITH AND CIRM ECONOMIC STIMULUS ISSUES.
9	INITIATING THE DISEASE TEAM PROJECTS HAS BEEN A
10	MASSIVE EFFORT. AND PAT OLSON AND HER TEAM HAVE
11	WORKED INCREDIBLY, INCREDIBLY INTENSIVELY WITH ALL
12	THE DISEASE TEAM GROUPS. AND I TELL YOU THEY'RE ALL
13	TAKING OFF IN THE RIGHT DIRECTION. AND I WANTED TO
14	THANK ALL OF THE UNIVERSITY INSTITUTIONS WHO WERE
15	REALLY IN A NEW FORMAT IN THESE DISEASE TEAMS
16	BECAUSE THEY'VE RESPONDED IN SUCH A POSITIVE WAY TO
17	US AND TO THE COMMERCIAL PARTNERS IN ACTUALLY
18	GETTING THINGS STRAIGHT TO VERY PRECISE AND ON THE
19	TRACK TO GO TO THE CLINIC. IT'S NOT NECESSARILY
20	NORMAL THAT THAT HAPPENS IN ACADEMIA. ACADEMICS
21	LIKE TO WANDER. I DID LOVE TO SORT OF INVESTIGATE
22	SOMETHING OFF THE TRAIL, NEW.
23	BUT ON THIS WORK, WE NEED TO STAY ON TRACK
24	TO GET AN IND IN THE TIME THAT'S THERE. AND IT'S
25	DEMANDING. IT'S WHAT THE COMPANIES NORMALLY HAVE TO

1	DO. AND I HAVE TO SAY THE INSTITUTIONS AND THE
2	LEADERSHIP IN THESE TEAMS ARE VERY FANTASTIC. YOU
3	KNOW, AT TIMES THEY MIGHT HAVE GRIZZLED ABOUT THE
4	PROCESS, BUT THEY'VE EMBRACED IT DRAMATICALLY. THEY
5	REALLY HAVE.
6	CHAIRMAN KLEIN: AND, DR. TROUNSON, I
7	THINK YOU WOULD EXTEND THAT PRAISE TOO TO THE
8	RESEARCH HOSPITALS AND THE RESEARCH INSTITUTES WHO
9	REACHED OUT TO EMBRACE THIS PLAN. SO WE REALLY HAVE
10	THE ENTIRE SCOPE OF THE RESEARCH COMMUNITY THAT
11	YOU'VE INDUCED TO REALLY COLLABORATE IN A PHENOMENAL
12	WAY WITH OUR INSTITUTION AND THE INTERNATIONAL
13	PARTNERS.
14	DR. TROUNSON: THAT'S RIGHT. I HAVE A
15	VIEW THAT THIS IS A KIND OF NEW PARADIGM WHERE
16	ACADEMICS AND BIOTECH INDUSTRY ARE WORKING IN
17	PARTNERSHIP THROUGH A TIME, THROUGH A SPACE KNOWN TO
18	BE A DANGEROUS SPACE FOR SURVIVAL FOR BIOTECH
19	COMPANIES AND ALSO NOT A PLACE WHERE ACADEMICS TEND
20	TO WANDER OR CLINICAL MEDICINE PEOPLE WANDER.
21	I THINK THEY'VE GOT THE ADDED STRENGTH OF
22	EACH OTHER, AND IT'S ACTUALLY WORKING AT THIS POINT.
23	IT'S WORKING BEAUTIFULLY.
24	WE'VE BEEN LOOKING AT DEVELOPING A
25	CLINICAL TRIALS RFA. WE'VE BEEN BUSY WITH THE
	CLINICAL INIALS NIA. WE VE BEEN BOST WITH THE

1	BIOTECH INDUSTRY INPUTS TO RFA'S AND GRANT REVIEWS.
2	I NOW HAVE MEETINGS REGULARLY WITH BIOTECH INDUSTRY
3	MEMBERS, AND I'M GETTING A GENERIC FEEL FOR THEIR
4	NEEDS. RATHER THAN JUST GETTING THE INPUTS ONE BY
5	ONE, GETTING GENERIC INPUT. AND IT'S INTERESTING
6	THAT THAT'S ALWAYS THAT'S HELPFUL ACTUALLY
7	BECAUSE YOU GET THEM SITTING TOGETHER GIVING YOU A
8	REAL VIEW OF WHAT WE CAN DO FOR THE WHOLE INDUSTRY
9	RATHER THAN WHAT CAN WE SPECIFICALLY DO FOR THAT
10	COMPANY. IT'S A DIFFERENT MESSAGE, AND IT'S AN
11	IMPORTANT ONE.
12	WE'VE BEEN BUSY SORT OF SETTING UP THE
13	CIRM 2010 REVIEW. COMMUNICATIONS HAS BEEN A BIG
14	ISSUE. CIRM SCIENTIFIC CREATIVITY INTERNSHIPS I PUT
15	TO THE CHAIR IN RESPONSE TO SOME YOUNG STUDENTS
16	COMING TO ME ABOUT FELLOWSHIPS. I LIVE IN A WORLD
17	THAT USED TO BE VERY CREATIVE WHERE PEOPLE WHO
18	INHABITED DIFFERENT SPACES, MUSIC, SCIENCE, OR
19	PHYSICS AND MOLECULAR BIOLOGY, TURN OUT TO COME UP
20	WITH THE MOST CREATIVE THINGS. AND I WANTED TO
21	STIMULATE SOME OF THESE YOUNG PEOPLE TO DO THAT AND
22	TO GIVE SMALL SCHOLARSHIPS TO THOSE YOUNG PEOPLE'S
23	CREATIVITY.
24	AND THE CHAIR HAS BEEN VERY SUPPORTIVE IN
25	THAT. I HAVEN'T REALLY SORT OF DEVELOPED ANYTHING

1	IN DETAIL ABOUT IT. BUT IF YOU WERE GOING TO GO TO
2	TWO OR THREE OF THESE DIFFERENT SPACES IN YOUR
3	SUMMER OR OVER A YEAR, I'D LOVE TO SUPPORT YOU TO DO
4	THAT BECAUSE I THINK WHAT WILL COME OF IT IS
5	SOMETHING VERY DIFFERENT AND SOMETHING VERY SPECIAL.
6	AND WE NEED A LOT OF CREATIVITY AS WELL AS THE HARD
7	YARDS IN THE FRAMEWORK. WE NEED IT ALL, AND I THINK
8	IT'S AN INVESTMENT IN OUR FUTURE.
9	ANYWAY, WE'LL COME BACK TO YOU PERHAPS
10	WITH THAT IN A LITTLE MORE DETAIL, BUT IT'S NOT A
11	LOT OF MONEY, BUT I THINK IT'S A LOT OF OPPORTUNITY
12	FOR CREATIVITY, PARTICULARLY FOR YOUNG PEOPLE WHO
13	ARE NOT QUITE SO CEMENTED IN WHAT THEY'VE GOT TO DO
	•
14	IN LIFE.
	IN LIFE. THIS IS A PICTURE OF THE ISSCR ANNUAL
15	
15 16	THIS IS A PICTURE OF THE ISSCR ANNUAL
14 15 16 17 18	THIS IS A PICTURE OF THE ISSCR ANNUAL GENERAL MEETING. IT'S ON JUNE 16TH TO 19 IN SAN
15 16 17	THIS IS A PICTURE OF THE ISSCR ANNUAL GENERAL MEETING. IT'S ON JUNE 16TH TO 19 IN SAN FRANCISCO. I WANTED TO LET YOU KNOW THAT IT'S
15 16 17 18	THIS IS A PICTURE OF THE ISSCR ANNUAL GENERAL MEETING. IT'S ON JUNE 16TH TO 19 IN SAN FRANCISCO. I WANTED TO LET YOU KNOW THAT IT'S HAPPENING. IT'S A MASSIVE MEETING OF THE STEM CELL
15 16 17 18 19	THIS IS A PICTURE OF THE ISSCR ANNUAL GENERAL MEETING. IT'S ON JUNE 16TH TO 19 IN SAN FRANCISCO. I WANTED TO LET YOU KNOW THAT IT'S HAPPENING. IT'S A MASSIVE MEETING OF THE STEM CELL INDUSTRY FROM AROUND THE WORLD. SO IT'S GOING TO BE
15 16 17 18 19 20 21	THIS IS A PICTURE OF THE ISSCR ANNUAL GENERAL MEETING. IT'S ON JUNE 16TH TO 19 IN SAN FRANCISCO. I WANTED TO LET YOU KNOW THAT IT'S HAPPENING. IT'S A MASSIVE MEETING OF THE STEM CELL INDUSTRY FROM AROUND THE WORLD. SO IT'S GOING TO BE A VERY IMPORTANT MEETING.
15 16 17 18 19 20	THIS IS A PICTURE OF THE ISSCR ANNUAL GENERAL MEETING. IT'S ON JUNE 16TH TO 19 IN SAN FRANCISCO. I WANTED TO LET YOU KNOW THAT IT'S HAPPENING. IT'S A MASSIVE MEETING OF THE STEM CELL INDUSTRY FROM AROUND THE WORLD. SO IT'S GOING TO BE A VERY IMPORTANT MEETING. ON THE EXTERNAL REVIEW, THE STRATEGIC PLAN
15 16 17 18 19 20 21 22	THIS IS A PICTURE OF THE ISSCR ANNUAL GENERAL MEETING. IT'S ON JUNE 16TH TO 19 IN SAN FRANCISCO. I WANTED TO LET YOU KNOW THAT IT'S HAPPENING. IT'S A MASSIVE MEETING OF THE STEM CELL INDUSTRY FROM AROUND THE WORLD. SO IT'S GOING TO BE A VERY IMPORTANT MEETING. ON THE EXTERNAL REVIEW, THE STRATEGIC PLAN CALLS FOR A REVIEW AFTER THREE YEARS BY A BLUE
15 16 17 18 19 20 21 22 23	THIS IS A PICTURE OF THE ISSCR ANNUAL GENERAL MEETING. IT'S ON JUNE 16TH TO 19 IN SAN FRANCISCO. I WANTED TO LET YOU KNOW THAT IT'S HAPPENING. IT'S A MASSIVE MEETING OF THE STEM CELL INDUSTRY FROM AROUND THE WORLD. SO IT'S GOING TO BE A VERY IMPORTANT MEETING. ON THE EXTERNAL REVIEW, THE STRATEGIC PLAN CALLS FOR A REVIEW AFTER THREE YEARS BY A BLUE RIBBON COMMITTEE OF SCIENTISTS, CLINICIANS,

1	COMMITMENTS, EVALUATE THE STRATEGIC PRINCIPLES, AND
2	MAKE RECOMMENDATIONS FOR CHANGES.
3	SO I'VE ACTUALLY GIVEN THE CHAIR SOME
4	THOUGHTS IN THIS RESPECT. AND I THINK HE'S TAKING
5	IT AROUND TO SEE HOW WELL IT FITS. BUT I THINK
6	THERE'S AN OPPORTUNITY TO GET SOME REALLY TOP-LINE
7	PEOPLE TO REVIEW US. I THINK THEY'RE THERE, THEY'RE
8	WILLING. WHAT WE JUST GOT TO DO IS NOW INITIATE
9	THAT.
10	SO WE'RE BUILDING THAT TEAM OF REVIEWERS,
11	DEVELOPING THE TIMELINES, AND MODELING THE
12	LONG-RANGE PROJECTIONS FOR THE ENTIRE 3 BILLION
13	AUTHORIZATION. SO WE'RE GETTING A COMPLETE PLAN OF
14	WHAT WE CAN ACTUALLY DO WITH THIS \$3 BILLION. IF WE
15	ARE SPENDING IT AT A CURRENT RATE, HOW LONG WILL IT
16	GO? WHAT CAN WE DO WITH IT? DO WE LENGTHEN IT? DO
17	WE SHORTEN IT? WHAT DO WE DO WITH IT? WE NEED TO
18	HAVE A GOOD IDEA AND BRING THIS BACK TO YOU FOR
19	DISCUSSION. REALLY NEEDS A GOOD IDEA OF WHERE WE'RE
20	GOING.
21	COMPLETED GRANT REVIEWS: BASIC BIOLOGY II
22	IS NOW COMPLETED. WE HAD 57 APPLICATIONS. THE
23	DEADLINE WAS IN DECEMBER. THE REVIEW WAS JUST HELD
24	IN FEBRUARY, AND WE'LL BE BRINGING IT TO THE ICOC IN
25	APRIL. AGAIN, I THINK, JEFF, WE HAD A GOOD MEETING

ON THOSE BASIC SCIENCE STUDIES. THERE WERE SOME
REALLY TOP-LINE ONES AND SOME THAT WERE NOT REALLY
QUITE UP, AS YOU WOULD EXPECT, BUT IT WAS A GREAT
MEETING. I THOUGHT THAT THE TEAM THAT WORKED ON
THAT GRANT REVIEW, THE REVIEWERS WERE TERRIFIC.
UPCOMING GRANT REVIEWS: STEM CELL
TRANSPLANTATION AND IMMUNOLOGY. THE REVIEW IS IN
APRIL 8TH AND 9TH, AND WE'RE BRINGING THAT TO THE
ICOC IN JUNE. WE HAD A TERRIFIC IMMUNOLOGY AND
TRANSPLANTATION SESSION AT THE GRANTEE WORKSHOP. IT
WAS REALLY, REALLY SUPERB. AND DAVID SACHS IN
PARTICULAR WHO LED THAT OFF REALLY GAVE US SOME
TERRIFIC INSIGHT INTO TOLERANCE AND WHAT'S REALLY
REQUIRED THERE. BUT YOU CAN SEE THAT THE
CALIFORNIANS ARE MOVING INTO THIS AREA AND HAVE GOT
A VERY WELL DEVELOPED PERSPECTIVE OF IT. SO WE'LL
BE INTERESTED IN READING AND REVIEWING THOSE
PROJECTS THAT CAME FORWARD.
RESEARCH LEADERSHIP AWARDS: WE RECEIVED
OUR FIRST APPLICATION, JUST ONE APPLICATION. SO
IT'S NOT HIGHLY COMPETITIVE JUST YET, BUT WE HAVE
ONE APPLICATION THAT WE WILL DEAL WITH IN REVIEW IN
MARCH AND BRING THAT TO THE ICOC IN APRIL, THE
OUTCOME.
I'VE ACTUALLY MANAGED TO GET ALL THE
29

1	TOP-LINE STEM CELL RESEARCHERS IN CALIFORNIA AND
2	AROUND THE WORLD TO BE PART OF THAT REVIEW TEAM.
3	THEY RESPONDED TO MY CALL TO REALLY THE TOP-LINE
4	PEOPLE TO BE AVAILABLE TO HELP US REVIEW THAT.
5	UPCOMING RFA'S: EARLY TRANSLATIONAL II
6	WAS POSTED IN FEBRUARY, RECEIPT OF PREAPPLICATIONS
7	IN MARCH, FULL GRANT APPLICATIONS BY JUNE, AND THE
8	REVIEW IN SEPTEMBER.
9	WE'VE ALSO GOT A TOOLS AND TECHNOLOGIES
10	AND BOTTLENECKS. QUITE A MOUTHFUL. WE'RE POSTING
11	THE RFA IN MARCH/APRIL, RECEIPT OF PREAPPLICATIONS
12	IN MAY, REVIEW IN NOVEMBER, AND ICOC IN JANUARY. SO
13	YOU'VE GOT A BIT OF AN IDEA WHAT'S IN FRONT WITH
14	THESE UPCOMING RFA'S.
15	AND A CLINICAL CONCEPT CLEARANCE, WE'RE
16	PRESENTING THAT TO YOU AT THIS MEETING.
17	REFERRING YOU TO THE WEB SITE ON THE CIRM
18	MODEL FOR CURRICULUM ON STEM CELL SCIENCE, I THINK
19	YOU WILL FIND IT INTERESTING READING.
20	THE MAJOR FACILITY PLAQUES, THIS IS NORMAL
21	THANKS THAT'S THERE WITH THANKS TO THE VOTERS OF
22	CALIFORNIA FOR PASSING PROPOSITION 71, CREATING THE
23	CALIFORNIA INSTITUTE FOR REGENERATIVE MEDICINE,
24	WHICH CONTRIBUTED MAJOR SUPPORT FOR THIS FACILITY.
25	NOW, THIS FACILITIES PLAQUE ON THE UC
	30

1	IRVINE, THE PROPOSED TEXT IS HERE. LET ME READ IT
2	TO YOU. IT DOESN'T REQUIRE THAT YOU APPROVE IT OR
3	NOT, BUT I WANT TO READ IT TO YOU SO WE CAN GIVE ANY
4	FEEDBACK THAT YOU THINK IS APPROPRIATE.
5	THIS BUILDING EXISTS TO TURN THE PROMISE
6	OF STEM CELL RESEARCH INTO THE REALITIES OF
7	THERAPIES AND CURES FOR THE WORLD'S MOST RAVAGING
8	DISEASES AND INJURIES. THE CREATION OF THIS
9	FACILITY AND THE WORK IT SUPPORTS IS TESTAMENT TO
10	THE PIONEERING SPIRIT AND COMPASSION OF THE PEOPLE
11	OF CALIFORNIA.
12	THE CONSTRUCTION OF THIS STATE-OF-THE-ART
13	FACILITY WAS ENABLED BY THE GENEROSITY OF THE PEOPLE
14	OF THE STATE OF CALIFORNIA. THEIR PASSAGE OF
15	PROPOSITION 71, THE CALIFORNIA STEM CELL RESEARCH
16	AND CURES ACT, CREATED THE CALIFORNIA INSTITUTE FOR
17	REGENERATIVE MEDICINE WHOSE SUPPORT WAS AT THE HEART
18	OF THE CREATION OF THIS FACILITY.
19	THE RESEARCH BEING CARRIED OUT HERE
20	REPRESENTS HOPES TO MILLIONS OF PATIENTS AND THEIR
21	FAMILIES IN CALIFORNIA AND AROUND THE WORLD
22	SUFFERING FROM DEBILITATING DISEASES OR DISABILITY.
23	I THINK THEY'RE VERY NICE WORDS. I DON'T
24	HAVE ANY PROBLEM WITH THEM AT ALL. YOU LET ME KNOW
25	IF IT DOESN'T REALLY SORT OF MEET YOUR APPROVAL.

1	LET ME KNOW AND WE'LL PASS IT ALONG.
2	WORKSHOPS COMPLETED: A CIRM DIVERSITY
3	WORKSHOP AT DREW UNIVERSITY WAS CHAIRED BY ART
4	TORRES PRECISELY AND EFFICIENTLY. AND I GOT THE
5	OUTCOMES. AND ON TIME, SAYS HIM.
6	WE HAD A CIRM GRANT WRITING WEBINAR WHICH
7	I THOUGHT WAS TERRIFIC. AND THE STAFF, PARTICULARLY
8	JOHN ROBSON AND PAT OLSON AND OTHER MEMBERS OF THE
9	STAFF, I THINK THEY DID A GREAT JOB IN THAT WEBINAR.
10	IT'S AVAILABLE NOW ON OUR WEB SITE. THIS WAS MEANT
11	TO HELP PEOPLE WHO ARE INTERESTED IN WRITING
12	APPLICATIONS FOR RFA'S, PARTICULARLY THOSE PEOPLE
13	WHO ARE IN THE BIOTECH INDUSTRY WHO SOMETIMES FEEL
14	THAT'S CHALLENGING TO DO. WE WANTED TO HELP THEM IN
15	THAT PROCESS.
16	WE HAD THE CIRM GRANTEE MEETING IN SAN
17	FRANCISCO. AS I SAID, IT WAS A FABULOUS MEETING.
18	AND THEN WE HAD A GERMAN/CIRM SCIENCE COLLABORATION
19	MEETING STRAIGHT AFTER THAT ON THE 6TH OF MARCH. SO
20	I HAVEN'T BEEN HOME FOR ABOUT SIX DAYS, BUT IT WAS
21	FULL OF SCIENCE. AND I THINK IT WAS ALL WONDERFUL
22	ACTUALLY.
23	DIVERSITY WORKSHOP AT DREW INCLUDED THE UC
24	MERCED, UC SAN DIEGO, UC RIVERSIDE, UCLA, ONYX
25	PHARMACEUTICALS, AND CIRM STAFF MEMBERS, AND THE
	32

MEMBERS OF THE ICOC ATTENDED.
IN TERMS OF THE HIGHLIGHTS, I'M JUST
MAKING DOT POINTS OF THOSE. WE'LL GET A REPORT FROM
STAFF IN DUE COURSE. THE HIGHLIGHTS: THE NEED FOR
AND VALUE OF GREATER DIVERSITY OF DONORS FOR HUMAN
EMBRYONIC STEM CELLS AND IPS CELLS.
SECONDLY, SUCCESSFUL STRATEGIES FOR
RECRUITING PARTICIPANTS IN BASIC RESEARCH AND
CLINICAL TRIALS.
THIRDLY, THE VALUE OF NICHE CAPACITY FOR
SMALLER RESEARCH INSTITUTIONS. WHAT CAN THEY DO
THAT ARE VERY SPECIFIC AND VERY USEFUL AND ARE
REALLY NATURALLY THEIRS?
AND FINALLY, FOUR, SUCCESSFUL MODELS FOR
UTILIZING PRACTICE-BASED NETWORKS TO SUPPORT
RECRUITMENT IN CLINICAL TRIALS.
THEY WERE THE HIGHLIGHTS THAT WERE BROUGHT
FORWARD FOR ME.
THE GRANTEE WORKSHOP, THERE WERE 450
REGISTRANTS, PI'S, TRAINEES, TRAINING AND BRIDGES
PROGRAM DIRECTORS, AND SHARED LAB DIRECTORS. THERE
WERE 130 ABSTRACTS PRESENTED AS POSTERS, GREAT
STUFF. SCIENCE PRESENTATIONS FROM LEADERS IN THE
FIELD AND A NETWORKING OPPORTUNITY FOR GRANTEES.
I TRIED TO GET THEM TO GIVE US SOME
33

1	FEEDBACK ON WHAT ARE OUR DEFICIENCIES IN CIRM AND
2	HOW CAN WE DO IT BETTER. THEY WERE INTERESTED IN
3	TALKING SCIENCE, NOT THAT STUFF, YOU KNOW. IF I
4	WANT FEEDBACK FROM THEM, I HAVE TO DO IT IN SOME
5	OTHER WAY. THIS WAS A SCIENCE THING AND THAT'S WHAT
6	THEY WERE KEENLY INTERESTED IN.
7	THE WEBINAR, THE GOALS WERE TO PROVIDE AN
8	OVERVIEW OF CIRM FUNDING GOALS, EDUCATE RESEARCHERS
9	ABOUT THE GRANT REVIEW PROCESS AND THE NATURE OF THE
10	REVIEW BOARDS, AND PROVIDE EXAMPLES OF SUCCESSFUL
11	INDUSTRY APPLICATIONS AND SOME GUIDANCE ON
12	SUCCESSFUL GRANT WRITING. AND THEY'RE AVAILABLE TO
13	EVERYBODY THROUGH THE CIRM WEB SITE.
14	THE GERMAN/CALIFORNIA WORKSHOP, IT WAS
15	ATTENDED BY 20 GERMAN SCIENTISTS FROM 12
15 16	ATTENDED BY 20 GERMAN SCIENTISTS FROM 12 INSTITUTIONS, AND WE MANAGED TO GET 12 CALIFORNIA
16	INSTITUTIONS, AND WE MANAGED TO GET 12 CALIFORNIA
16 17	INSTITUTIONS, AND WE MANAGED TO GET 12 CALIFORNIA SCIENTISTS TO EXTEND THEIR TIME FROM THE GRANTEE
16 17 18	INSTITUTIONS, AND WE MANAGED TO GET 12 CALIFORNIA SCIENTISTS TO EXTEND THEIR TIME FROM THE GRANTEE WORKSHOP AND BE INVOLVED. I SAW FIRSTHAND SYNERGIES
16 17 18 19	INSTITUTIONS, AND WE MANAGED TO GET 12 CALIFORNIA SCIENTISTS TO EXTEND THEIR TIME FROM THE GRANTEE WORKSHOP AND BE INVOLVED. I SAW FIRSTHAND SYNERGIES IDENTIFIED IN AREAS OF NEURAL, CARDIAC, PANCREATIC,
16 17 18 19 20	INSTITUTIONS, AND WE MANAGED TO GET 12 CALIFORNIA SCIENTISTS TO EXTEND THEIR TIME FROM THE GRANTEE WORKSHOP AND BE INVOLVED. I SAW FIRSTHAND SYNERGIES IDENTIFIED IN AREAS OF NEURAL, CARDIAC, PANCREATIC, AND CARTILAGE/BONE PROJECTS AND ALSO IN
16 17 18 19 20	INSTITUTIONS, AND WE MANAGED TO GET 12 CALIFORNIA SCIENTISTS TO EXTEND THEIR TIME FROM THE GRANTEE WORKSHOP AND BE INVOLVED. I SAW FIRSTHAND SYNERGIES IDENTIFIED IN AREAS OF NEURAL, CARDIAC, PANCREATIC, AND CARTILAGE/BONE PROJECTS AND ALSO IN BIOENGINEERING. YOU COULD SEE THEM GETTING
16 17 18 19 20 21	INSTITUTIONS, AND WE MANAGED TO GET 12 CALIFORNIA SCIENTISTS TO EXTEND THEIR TIME FROM THE GRANTEE WORKSHOP AND BE INVOLVED. I SAW FIRSTHAND SYNERGIES IDENTIFIED IN AREAS OF NEURAL, CARDIAC, PANCREATIC, AND CARTILAGE/BONE PROJECTS AND ALSO IN BIOENGINEERING. YOU COULD SEE THEM GETTING TOGETHER, CLICKING TOGETHER. AND I THINK THESE WILL
16 17 18 19 20 21 22	INSTITUTIONS, AND WE MANAGED TO GET 12 CALIFORNIA SCIENTISTS TO EXTEND THEIR TIME FROM THE GRANTEE WORKSHOP AND BE INVOLVED. I SAW FIRSTHAND SYNERGIES IDENTIFIED IN AREAS OF NEURAL, CARDIAC, PANCREATIC, AND CARTILAGE/BONE PROJECTS AND ALSO IN BIOENGINEERING. YOU COULD SEE THEM GETTING TOGETHER, CLICKING TOGETHER. AND I THINK THESE WILL BE SOME OF THESE WILL BE EXPRESSED, I THINK, IN

1	PROJECTS ALONG THE DEVELOPMENT PIPELINE ALL THE WAY
2	ALONG FROM THE BASIC THROUGH TO THE CLINICAL WORK.
3	UPCOMING WORKSHOPS: THIS WILL GIVE YOU AN
4	IDEA OF WHAT WE'RE IN FOR AT THE MOMENT. THERE'S
5	ONE FOR MARYLAND IN THE SCIENCE COLLABORATION.
6	THAT'S ON MARCH 11TH AND 12TH. A CIRM CONSORTIUM
7	WHERE WE'RE WORKING WITH THE FDA ON A WEBINAR IN
8	APRIL. THE MRC/CIRM STEM CELL NUCLEAR TRANSFER
9	PARTHENOGENESIS WORKSHOP WILL BE JUNE 13TH AND 14TH.
10	JEANNIE, WILL, SHE PROMISES, BE ALONG AS WE HOPE
11	SOME OF THE OTHER PEOPLE ARE BECAUSE WE'RE GOING TO
12	DISCUSS STEM CELL NUCLEAR TRANSFER. WHAT IS THE
13	ROLE OF THAT NOW? HAS IT BEEN OVERTAKEN BY OTHER
14	THINGS? AND WHAT IS THE STATE TO BRING ALL THE
15	PEOPLE AROUND THE WORLD, FROM THE UK, CHINA,
16	EVERYONE WHO'S BEEN WORKING IN THIS AREA TOGETHER
17	AND TRY AND WORK OUR WAY THROUGH THAT.
18	THERE'S AN ISSCR CLINICAL TRIALS
19	REGULATORY HARMONIZATION WORKSHOP THAT WE'RE VERY
20	INVOLVED WITH WITH THE ISCT. THAT'S JUST BEFORE THE
21	ISSCR ANNUAL MEETING ON JUNE THE 15TH. SO ANYONE
22	WHO HAS INTEREST IN THIS REGULATORY AREA, WE ARE
23	GOING TO DEAL WITH THE DIFFERENCES BETWEEN
24	COUNTRIES, BUT ALSO SOME OF THE ISSUES AND
25	DEFICIENCIES IN OUR OWN SYSTEM. AND THERE ARE SOME
	פר

1	THAT ARE CLEARLY THERE. SEE IF WE CAN MAKE SOME
2	PROGRESS ABOUT ASSISTING THE STEM CELL THERAPIES
3	BECAUSE THEY'RE HAVING A PRETTY ROUGH TIME AT THE
4	MOMENT.
5	MOST OF THEM, I THINK ALL OF THEM, ARE
6	ACTUALLY ON HOLD, ALL THE PLURIPOTENTIAL STEM CELL
7	WORK IS CURRENTLY ON HOLD. AND IT'S A TOUGH TASK.
8	AND GETTING COMPANIES TO STAY ON HOLD FOR A LONG
9	TIME IS REALLY TOUGH ON THEIR SURVIVAL.
10	WE HAVE A CHINA/CIRM SCIENCE COLLABORATION
11	MEETING ON JUNE THE 20TH AFTER THE ISSCR MEETING,
12	AND WE'RE MEETING WITH SPAIN AND THE NETHERLANDS
13	LATER IN THE YEAR. SO THERE'S PLENTY TO DO IN TERMS
14	OF THESE INTERACTIONS.
15	SO IF I CAN INVITE MARGARET FERGUSON
16	FORWARD TO GIVE YOU A BRIEF ON THE BUDGET ALLOCATION
17	AND EXPENDITURE REPORT, CHAIR, IS THAT OKAY?
18	CHAIRMAN KLEIN: THAT WOULD BE FINE.
19	MS. FERGUSON: WELL, GOOD MORNING, MEMBERS
20	OF THE ICOC, CIRM STAFF, AND THE PUBLIC. I'M HERE
21	TODAY TO PRESENT AN UPDATE ON THE FISCAL YEAR
22	2009-10 CIRM SUPPORT BUDGET AND EXPENDITURES THROUGH
23	JANUARY 31ST.
24	ON THE SCREEN BEFORE YOU, YOU WILL SEE
25	THAT WE HAVE A BAR CHART. BASICALLY THE FIRST

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1	GROUPING ON THE FAR RIGHT SIDE IS THE TOTAL CIRM
2	SUPPORT EXPENDITURES THROUGH JULY I'M SORRY
3	JANUARY. THEN WE MOVE TO TOTAL OPERATING EXPENSE
4	AND EQUIPMENT, SALARIES AND BENEFITS BEING THE LAST
5	GROUPING. THE BLUE BAR IS OUR ORIGINAL APPROVED
6	ICOC BUDGET. THE ORANGE BAR INDICATES WHAT WE HAVE
7	RECORDED IN EXPENDITURES THROUGH JANUARY. AND THE
8	YELLOW IS WHAT IS STILL AVAILABLE TO MEET OUR NEEDS
9	THROUGH JUNE 30, 2010.
10	THROUGH JANUARY WE'VE RECORDED TOTAL
11	EXPENDITURES OF \$5.6 MILLION AGAINST OUR \$12.9
12	MILLION BUDGET. WE ALSO HAVE SPENT \$3.8 MILLION OF
13	OUR \$7.4 MILLION BUDGET THAT WAS ALLOCATED FOR
14	SALARIES AND BENEFITS, \$1.7 MILLION OF OUR \$5.5
15	MILLION ALLOCATION FOR OPERATING EXPENDITURES AND
16	EQUIPMENT, AND THAT INCLUDES, BUT IT'S NOT LIMITED
17	TO COST FOR INTERAGENCY AGREEMENTS, OUR CONTRACTS,
18	MEETINGS, INFORMATION TECHNOLOGY, TRAVEL, SUPPLIES,
19	TRAINING, AND COMMUNICATION COSTS.
20	AS NOTED ON THE EXPENDITURE SUMMARY IN
21	YOUR BINDERS, AND I DON'T BELIEVE THAT'S ON THE
22	SCREEN LET ME TAKE A GOOD. IT'S ON WE
23	HAVE EXPENDED 53 PERCENT OF OUR SALARIES AND
24	BENEFITS AND 32 PERCENT OF OUR OPERATING
25	EXPENDITURES AND EQUIPMENT ALLOCATION FOR AN OVERALL

1	44 PERCENT OF OUR APPROVED BUDGET HAS BEEN SPENT OR
2	RECORDED THROUGH JANUARY. WHEN WE TAKE INTO
3	CONSIDERATION THAT WE HAVE ABOUT \$549,000 IN GOODS
4	AND SERVICES THAT WERE RENDERED IN JANUARY AND NOT
5	YET PROCESSED FOR PAYMENT OR POSTED TO OUR BUDGET
6	REPORT, THAT WOULD INCREASE OUR OPERATING
7	EXPENDITURE AND EQUIPMENT ALLOCATION TO 42 PERCENT
8	BEING SPENT AND AN OVERALL EXPENDITURE AT 48 PERCENT
9	THROUGH JANUARY.
10	AT THIS TIME WE'RE SHOWING AN OVERALL
11	SAVINGS OF ABOUT 10 PERCENT AGAINST OUR APPROVED
12	BUDGET, SALARIES AND WAGES AT A 5-PERCENT SAVINGS,
13	AND OUR OPERATING EXPENSE AND EQUIPMENT AT
14	16-PERCENT SAVINGS. HOWEVER, THERE'S STILL SIX
15	MONTHS OR FIVE MONTHS MORE OF EXPENDITURES THAT WE
16	WILL BE RECORDING THAT WILL INCLUDE COSTS LIKE THE
17	GRANTEE MEETING, OUR SCHEDULED GRANT WORKING GROUPS
18	THAT WE STILL HAVE, THE BALANCES ON SERVICES THAT
19	WILL BE RENDERED FOR OUR CONTRACTS; BUT OVERALL THE
20	16 PERCENT WILL SHRINK, BUT WE ARE DEFINITELY
21	LOOKING AT ABOUT 5-PERCENT SALARY SAVINGS AND
22	OVERALL, AGAIN, RIGHT NOW AT 10 PERCENT AND
23	SHRINKING.
24	NOW I'LL STAND OPEN FOR ANY QUESTIONS THAT
25	YOU MIGHT HAVE.

1	CHAIRMAN KLEIN: ANYONE ON THE BOARD HAVE
2	ANY QUESTIONS? THANK YOU VERY MUCH FOR ALL YOUR
3	DEDICATED WORK.
4	MS. SAMUELSON: CAN YOU HEAR ME?
5	DR. TROUNSON: INVITE JOHN ROBSON JUST TO
6	UPDATE YOU WHERE OUR TOTAL FINANCES ARE.
7	MR. SHESTACK: ALAN, CAN YOU HEAR JOAN
8	SAMUELSON ASKING A QUESTION?
9	DR. ROBSON: SO THIS WILL BE VERY BRIEF
10	BECAUSE IT REALLY IS THE SAME STORY I GAVE TO YOU AT
11	THE LAST MEETING. THINGS REALLY HAVEN'T CHANGED
12	MUCH. SO WE'VE MODELED OUR PROJECTED FINANCES FOR
13	EXPENDITURES TO INCLUDE ALL OF THE MONEY THAT WE
14	CURRENTLY HAVE AVAILABLE TO US THROUGH THE SALE OF
15	BONDS. THIS INCLUDES ALL THE PROGRAMS THAT HAVE
16	CURRENTLY BEEN APPROVED AND ARE UNDER WAY PLUS THE
17	PROGRAMS LISTED HERE THAT HAVE BEEN THROUGH CONCEPT
18	APPROVAL: BASIC BIOLOGY, IMMUNOLOGY, THE RESEARCH
19	LEADERSHIP AWARDS, EARLY TRANSLATION, AND TOOLS AND
20	TECHNOLOGY. AND THE DOLLARS LISTED ARE THE TARGET
21	DOLLARS THAT THE ICOC APPROVED.
22	AND, AGAIN, THIS GRAPH WHICH SORT OF
23	SUMMARIZES OUR CURRENT SITUATION SHOWS THAT AT THE
24	END OF WE'VE JUST MODELED THIS THROUGH THE END OF
25	THE FISCAL YEAR, THAT'S TO THE END OF JUNE 2011,
	20

1	THAT WE'LL HAVE ABOUT \$55 MILLION REMAINING IN OUR
2	FUND IF WE DON'T RAISE ANY MORE MONEY, OR THIS
3	DOESN'T ACCOUNT FOR ANY OTHER PROGRAMS THAT COULD BE
4	FUNDED BETWEEN NOW AND THEN.
5	BUT THAT SITUATION IS BASICALLY UNCHANGED
6	FROM WHERE WE WERE LAST TIME. AND IT MEANS WE HAVE
7	ENOUGH MONEY TO CARRY US THROUGH THE FIRST QUARTER
8	OF THE FOLLOWING FISCAL YEAR. ANY QUESTIONS?
9	CHAIRMAN KLEIN: I WOULD POINT OUT TO THE
10	BOARD THAT WE HAVE WORKED WITH THE DEPARTMENT OF
11	FINANCE AND THE TREASURER'S OFFICE, SO THERE IS
12	ADDITIONAL AUTHORITY FOR FUNDS THAT WILL TAKE US
13	BEYOND THAT POINT AND GIVE US THE ADEQUATE BUFFER.
14	WE'VE TALKED WITH DR. TROUNSON ABOUT PROGRAMS
15	ANTICIPATED TO MAKE SURE THAT WE CAN ACCOMMODATE
16	THOSE PROGRAMS IN THE ADDITIONAL FUNDING.
17	DR. TROUNSON: JUST TO FINISH OFF, ALL THE
18	STAFF, OF COURSE, HAVE BEEN INCREDIBLY BUSY, AND
19	THEY'RE A FANTASTIC GROUP OF PEOPLE TO WORK WITH.
20	THERE'S NOW 43 OR 44. DEPENDS HOW YOU COUNT SOME
21	INDIVIDUALS. BUT WE'RE GETTING CLOSE TO THAT 50
22	MARK. IT'S COMING ON STRONG. BUT THEY'RE WONDERFUL
23	PEOPLE, AND I'M REALLY PROUD TO WORK WITH THEM, ALL
24	OF THEM. THANK YOU VERY MUCH.
25	(APPLAUSE.)
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1	MS. SAMUELSON: THIS IS JOAN SAMUELSON.
2	I'M WONDERING IF I CAN BE HEARD.
3	CHAIRMAN KLEIN: WHAT I WOULD LIKE TO DO
4	AT THIS TIME IS MOVE TO ITEM 8, IF WE COULD, PLEASE.
5	I'M GOING TO TAKE UP ITEM 8. AND WE'RE NOT GOING TO
6	TAKE UP ITEM 14 TODAY. WE'RE NOT AT A STAGE OF OUR
7	NEGOTIATIONS WITH THE CANDIDATES TO BE ABLE TO
8	ADDRESS THIS ITEM YET, BUT WE ARE PROGRESSING.
9	THERE'S A LOT OF PROGRESS THAT'S BEEN MADE. ITEM 14
10	WE'RE NOT TAKING UP.
11	EXCUSE ME. STAFF HAS MODIFIED IT. IT IS
12	STILL 14 13. THE STAFF HAS MODIFIED THE NUMBER
13	SINCE THE LAST ROUND. THANK YOU.
14	MS. SAMUELSON: CAN ANYONE HEAR ME? THIS
15	IS JOAN.
16	DR. OLSON: MR. CHAIRMAN, MEMBERS OF THE
17	BOARD, AND THE AUDIENCE, TODAY I'D LIKE TO PRESENT
18	TO YOU THE CONCEPT PROPOSAL FOR A TARGETED CLINICAL
19	DEVELOPMENT RFA AND REQUEST YOUR CONCEPT CLEARANCE
20	FOR THIS PROGRAM. THIS IS AGENDA NO. 8 IN YOUR
21	BINDERS.
22	I JUST WANT TO REMIND YOU, SO THE PURPOSE
23	OF THIS TARGETED CLINICAL DEVELOPMENT PROGRAM IS TO
24	FACILITATE THE DEVELOPMENT OF NOVEL CELL THERAPIES
25	DERIVED FROM PLURIPOTENT STEM CELLS FOR THE BENEFIT

1	OF PERSONS WITH DISEASE OR SERIOUS INJURY. AND I'M
2	SURE WE ALL REMEMBER WHY PROPOSITION WAS PASSED FOR
3	PLURIPOTENT STEM AND PROGENITOR CELLS TO BRING
4	THERAPIES. AND I THINK YOU MAY ALSO RECALL THAT THE
5	STRATEGIC GOALS THAT WERE OUTLINED IN THE 2006
6	STRATEGIC PLAN THAT YOU APPROVED AND THAT REAFFIRMED
7	WITH THE 2009 STRATEGIC PLAN, ONE OF THE
8	ASPIRATIONAL GOALS, AND I DO PUT IT THAT WAY AS
9	ASPIRATIONAL, WAS ESSENTIALLY THE DEMONSTRATION IN A
10	PHASE II CLINICAL TRIAL OF ESSENTIALLY CLINICAL
11	PROOF OF CONCEPT THAT A PLURIPOTENT-DERIVED CELL
12	THERAPY COULD BRING BENEFIT TO PATIENTS OR COULD
13	POTENTIALLY BRING BENEFIT TO PATIENTS.
14	SO WE LOOK AT THAT RFA AS BEING DIRECTLY
15	RESPONSIVE TO THIS STRATEGIC OBJECTIVE. AND,
16	THEREFORE, THE GOAL OF THIS RFA IS, IN FACT, THE
17	COMPLETION OF EARLY STAGE CLINICAL TRIALS WITHIN A
18	THREE-YEAR TIME PERIOD THAT WILL, ONE, DEMONSTRATE
19	PRELIMINARY SAFETY DATA IN HUMANS AND THAT WILL
20	PROVIDE COMPELLING DATA FOR PROOF OF MECHANISTIC
21	CONCEPT AND/OR EARLY TESTING OF EFFICACY THAT COULD
22	LEAD TO MORE DEFINITIVE CLINICAL STUDIES. SO THAT'S
23	WHAT WE HOPE TO ACCOMPLISH WITH THIS RFA.
24	IN ORDER FOR THIS TO HAPPEN IN THREE
25	YEARS, WHAT WE WOULD DO IS WE WOULD REQUIRE THAT AN

1	IND ACTUALLY BE FILED BY THE APPLICATION DEADLINE ON
2	THE CELL THERAPY DERIVED FROM PLURIPOTENT STEM CELLS
3	THAT IS PROPOSED FOR FUNDING. AND FOR THOSE
4	APPLICANTS THAT ARE SUCCESSFUL IN THE PEER REVIEW
5	PROCESS AND UPON PRESENTATION TO THIS BOARD AND
6	APPROVAL BY THIS BOARD, WE WOULD REQUIRE THAT THE
7	IND BE ACTIVE; THAT IS, THE IND HOLDER BE ABLE TO
8	ENROLL PATIENTS BEFORE THE ISSUANCE OF THE NOTICE OF
9	AWARD.
10	I THINK YOU HEARD A LITTLE BIT OF THE
11	RATIONALE FOR THIS. AS DR. TROUNSON INDICATED, OF
12	THE THREE STUDIES THAT WE ARE AWARE OF OF THE
13	THREE IND'S THAT HAVE BEEN FILED TO DATE FOR
14	PLURIPOTENT-DERIVED CELL THERAPIES, ALL ARE
15	CURRENTLY ON CLINICAL HOLD. ALL ARE CURRENTLY, I'M
16	SURE, IN ACTIVE WORK TO SATISFY THE FDA AS TO THE
17	CONDITIONS THAT WOULD ALLOW THEM TO MOVE FORWARD.
18	THIS IS AN IMPORTANT PART OF IT.
19	SO AS I SAY, THE RATIONALE FOR THESE
20	REQUIREMENTS IS A TIMING ONE. THREE YEARS IS GOING
21	TO BE YOU KNOW, I MEAN THAT'S REASONABLE FROM THE
22	START OF THE AWARD FOR YOU TO CONDUCT THE PHASE I
23	AND POSSIBLY A PHASE II A. IT WILL BE CHALLENGING.
24	NEW THERAPIES OF THIS NATURE, ENROLLMENT DOESN'T
25	JUST HAPPEN LIKE THAT, BUT THE NUMBER OF PATIENTS

1	LIKELY TO BE REQUIRED WILL BE NOT BE HUGE, SO IT AT
2	LEAST IS FEASIBLE.
3	AND THEN WE WOULD ALSO POINT OUT THAT THE
4	UPCOMING DISEASE TEAM AWARDS COULD CAPTURE THOSE
5	PROPOSALS THAT ARE MORE IN THE PRECLINICAL
6	DEVELOPMENT STAGE.
7	I JUST WANT TO HIGHLIGHT FOR YOU ACTUALLY
8	WHERE THIS PROPOSAL WOULD OR WHERE THIS RFA WOULD
9	FALL ON THE SPECTRUM, ON SORT OF OUR STRATEGIC RFA
10	SPECTRUM OF ACTIVITIES, HOW IT FALLS IN THIS STAGE.
11	I THINK YOU ARE AWARE OF WHERE THE EARLY
12	TRANSLATIONAL FALLS. THE DISEASE TEAM RESEARCH
13	AWARDS, THE FIRST ONE THAT YOU APPROVED HAD AS A
14	GOAL AN IND FILING. THE UPCOMING DISEASE TEAM II
15	RESEARCH AWARDS THAT WE HOPE TO BRING TO YOUR
16	ATTENTION MID TO LATE SUMMER FOR CONCEPT APPROVAL
17	WOULD ESSENTIALLY COVER PRECLINICAL DEVELOPMENT AND
18	CLINICAL DEVELOPMENT ACTIVITIES. BUT THIS ONE IS
19	SPECIFICALLY TARGETED FOR THOSE APPLICATIONS USING
20	PLURIPOTENT-DERIVED CELL THERAPIES THAT HAVE AN IND
21	FILED, ACTIVE BY THE START OF THE AWARD, AND BY THE
22	DEMONSTRATION OF SOME PROOF OF CLINICAL CONCEPT,
23	WHICH COUNTS AS AN EARLY WHAT'S CALLED EARLY
24	CLINICAL STUDY BEFORE GOING ON TO MORE DEFINITIVE
25	STUDIES.
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1	THE SCOPE OF THE AWARD I THINK I'VE
2	ALREADY INDICATED TO SOME EXTENT, BUT IT IS FOR THE
3	CONDUCT OF THE EARLY STAGE CLINICAL TRIALS AND FOR
4	SUPPORTING ACTIVITIES THAT WILL, ONE, PROVIDE
5	IMPORTANT ADDITIONAL INFORMATION ON THE CLINICAL
6	QUESTION.
7	WE HAD A VERY INSPIRING TALK FROM OUR
8	KEYNOTE SPEAKER AT THE GRANTEE MEETING FROM DR.
9	SUSAN DESMOND-HELLMAN. AND I THINK YOU ALL KNOW SHE
10	WAS THE FORMER VICE, I DON'T KNOW IF HER TITLE WAS
11	PRESIDENT OR VICE PRESIDENT OF PRODUCT DEVELOPMENT
12	AT GENENTECH, BUT SHE WAS BASICALLY, BEFORE SHE TOOK
13	ON THE CHANCELLORSHIP AT UCSF, SHE WAS HEAD OF ALL
14	THE PRODUCT DEVELOPMENT ACTIVITIES AT GENENTECH.
15	AND THE POINT THAT SHE MADE VERY CONVINCINGLY IS
16	THAT WHEN YOU TAKE EXPERIMENTAL THERAPIES INTO
17	PATIENTS, YOU HAVE A RESPONSIBILITY TO LEARN ALL YOU
18	CAN ABOUT THE DISEASE, ABOUT THE PROPOSED THERAPY
19	FROM THAT STUDY. YOUR TRIAL MAY NOT BE SUCCESSFUL
20	IN THE SENSE THAT YOUR CANDIDATE THERAPEUTIC MAY NOT
21	SHOW ADEQUATE SAFETY, BUT YOU WILL LEARN SOMETHING
22	IF YOU DESIGN IT CORRECTLY.
23	MS. SAMUELSON: THIS IS JOAN SAMUELSON.
24	CAN I BE HEARD ON THIS CALL?
25	CHAIRMAN KLEIN: YES, YOU CAN, JOAN.
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1	MS. SAMUELSON: GOOD. I'M ON THE CELL.
2	MY HOME LINE ISN'T WORKING.
3	CHAIRMAN KLEIN: CAN YOU HEAR DR. OLSON,
4	JOAN?
5	MS. SAMUELSON: YES, I CAN ON THIS LINE.
6	CHAIRMAN KLEIN: CAN YOU HEAR DR. OLSON?
7	MS. SAMUELSON: YES.
8	CHAIRMAN KLEIN: SO IF THE STAFF WOULD
9	PLEASE PUT A SIDE CALL INTO JOAN SAMUELSON. HER
10	LINE DOESN'T SEEM TO BE FULLY FUNCTIONING.
11	MS. SAMUELSON: I'M GOING TO CLOSE THAT
12	LINE. I CAN HEAR PAT, BUT I CAN'T BE HEARD. I'LL
13	SHUT THAT OFF AND JUST TALK ON MY CELL FOR NOW.
14	CHAIRMAN KLEIN: THAT'S FINE. IF STAFF
15	WILL JUST FOLLOW UP WITH A CALL. EXCUSE ME, DR.
16	OLSON, IF YOU WILL CONTINUE.
17	DR. OLSON: SO AS I SAID, I THINK IT'S
18	IMPORTANT THAT WE FUND THE ACTIVITIES TO ALLOW
19	INVESTIGATORS TO PERHAPS CONDUCT ADDITIONAL STUDIES
20	WHETHER IT'S ON SAMPLES OBTAINED OR WHAT THAT WILL
21	HELP ADDRESS THE CLINICAL QUESTION.
22	ANOTHER THING IS WE WOULD FUND ACTIVITIES
23	THAT ENABLE THE CLINICAL STUDY. I CITE, FOR
24	EXAMPLE, CGMP PRODUCTION OR OPTIMIZATION OF
25	PRODUCTION OF THE CANDIDATE THERAPEUTIC FOR THE
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1	PROPOSED TRIALS. I WILL REMIND THIS BOARD THAT CIRM
2	IS ACTUALLY ONE OF THE FEW ORGANIZATIONS THAT
3	DOESN'T JUST FUND A CLINICAL STUDY, BUT FUNDS ALL
4	THE ACTIVITIES THAT ARE ACTUALLY NECESSARY TO RUN A
5	CLINICAL STUDY. AND SO THAT IS REALLY A UNIQUE
6	ATTRIBUTE OF THE FUNDING WE PROVIDE. AND THAT WAS
7	ACTUALLY MADE VERY CLEAR TO US IN THE FIRST DISEASE
8	TEAM RESEARCH AWARDS WHERE, YOU KNOW, WE'VE HAD
9	INVESTIGATORS COME UP TO US AND TELL US THEY SIMPLY
10	COULD NOT DO THE KIND OF THING THEY WERE DOING
11	BECAUSE THEY WOULD HAVE TO GET FIVE DIFFERENT
12	GRANTS.
13	AS YOU KNOW, IN TODAY'S FUNDING
14	ENVIRONMENT, THIS IS A CHALLENGING ACTIVITY. SO IT
15	WOULD DO THAT.
16	WHAT IT WOULD NOT DO IS IT WOULD NOT FUND,
17	FOR EXAMPLE, THE CONDUCT OF PIVOTAL STUDIES. IT
18	WOULD NOT FUND, FOR EXAMPLE, THE SCALE-UP OR
19	PRODUCTION FOR PIVOTAL STUDIES. I WANT TO PUT A BIT
20	OF A RATIONALE FOR THIS, AND, AGAIN, I'LL CITE
21	ACTUALLY. SO OUR FINAL KEYNOTE SPEAKER AT THE
22	GRANTEE MEETING WAS DR. COREY GOODMAN, WHO I THINK
23	MANY OF YOU MAY KNOW HAS BEEN INVOLVED IN A NUMBER
24	OF SUCCESSFUL START-UPS, WAS MOST RECENTLY AT PFIZER
25	IN CHARGE OF A STEM CELL THERAPY UNIT, AND NOW MORE

1	RECENTLY, I BELIEVE, IS ON THE BOARD OF IPERIAN. AM
2	I CORRECT ABOUT THAT? SO WHAT HE DID IS HE TALKED
3	ABOUT DRUG DEVELOPMENT AND IT WAS INTERESTING.
4	AND YOU KNOW THAT ONE BILLION DOLLAR
5	FIGURE YOU HEAR TOSSED AROUND ALL THE TIME ABOUT THE
6	COST OF DRUG DEVELOPMENT. HE INDICATED IT WAS
7	LARGER, AND I WON'T TELL YOU HOW MUCH LARGER BECAUSE
8	IT WAS A LITTLE BIT FRIGHTENING. BUT, YOU KNOW,
9	PART OF THE THING WAS IT'S ALWAYS THE BALANCE.
10	COMPANIES ALWAYS WANT COMPANIES WHO ARE USUALLY
11	THE PRIMARY DEVELOPER OF DRUGS ALWAYS WANT TO MOVE
12	FORWARD AS FAST AS POSSIBLE AND BE READY WHEN THE
13	FIRST TRIAL IS SUCCESSFUL TO MOVE ON TO THE NEXT
14	ONE, SO THEY DO A LOT OF ACTIVITIES AT RISK.
15	AND GIVEN THE PROBABILITIES OF TECHNICAL
16	SUCCESS, THAT CAN BE A VERY RISKY PROPOSITION. SO
17	HE BASICALLY WAS POINTING OUT THAT, YOU KNOW, YOU DO
18	HAVE TO BALANCE DOING ACTIVITIES AT RISK GIVEN THE
19	FACT THAT A LOT OF STUDIES ARE NOT SUCCESSFUL IN THE
20	SENSE OF MEETING THE END POINT THAT WOULD ALLOW THEM
21	TO PROCEED. MAYBE SUCCESSFUL AS WE HOPE IN AT LEAST
22	LEARNING SOMETHING ABOUT THE DISEASE. SO WE WANT TO
23	MAKE SURE THAT WE FUND THE IMPORTANT ACTIVITIES
24	NECESSARY TO GET THE OUTCOMES WE WANT FOR THIS
25	STUDY, BUT NOT THOSE THAT CAN BE DONE SUBSEQUENTLY.

1	THE INVESTIGATOR I MEAN THE ELIGIBILITY
2	CRITERIA IS OUR TYPICAL ELIGIBILITY CRITERIA THAT
3	WAS AGREED TO WITH THIS BOARD AS THE RESULT OF A
4	STUDY WITH A TASK FORCE, SO THAT'S TYPICAL. THE
5	PERCENT EFFORT REQUIREMENTS, I MEAN FOR THIS KIND OF
6	THING WE WANT 30-PERCENT EFFORT FROM THE PRINCIPAL
7	INVESTIGATOR BECAUSE ESSENTIALLY CLINICAL
8	DEVELOPMENT IS ALWAYS A TEAM AND A MULTIDISCIPLINARY
9	ACTIVITY. WE WILL HAVE A CO-PI.
10	IT IS OPEN TO BOTH ACADEMIC NONPROFIT AND
11	FOR-PROFIT INSTITUTIONS. YOU WILL BE DELIGHTED TO
12	SEE THAT WE WILL SIMPLY USE THE LOI MECHANISM TO
13	NOTIFY US. WE DON'T FORESEE AN AVALANCHE OF
14	APPLICATIONS THAT WILL MEET THE REQUIREMENTS FOR
15	THIS PARTICULAR STUDY OR THIS PARTICULAR RFA.
16	THE AWARD INFORMATION THAT WE ARE
17	PROPOSING IS THE FOLLOWING: CIRM FUNDING WILL BE
18	THE LESSER OF 25 MILLION FOR A GIVEN STUDY OR 50
19	PERCENT OF THE TOTAL COST OF THE PROPOSED PROGRAM.
20	AND I WOULD REMIND YOU ALL THAT CIRM-FUNDED RESEARCH
21	IS TO BE CONDUCTED IN CALIFORNIA. THERE WILL BE A
22	MATCHING FUND REQUIREMENT. CLINICAL DEVELOPMENT,
23	PARTICULARLY CLINICAL DEVELOPMENT OF CELL THERAPIES
24	AND OF PLURIPOTENT-DERIVED CELL THERAPIES, IS AN
25	EXPENSIVE PROPOSITION AT THIS STAGE.

1	AS IT IS, I WOULD POINT OUT THAT FOR
2	ALMOST ANY DRUG DEVELOPMENT, EVEN A SMALL MOLECULE,
3	AT THE EARLY STAGES OF CLINICAL DEVELOPMENT, IT IS
4	MORE EXPENSIVE. SO WE ARE HAVING A MATCHING FUND
5	REQUIREMENT WHERE CIRM AND THE APPLICANT FUNDING
6	CONTRIBUTIONS TO BE REASONABLY DISTRIBUTED OVER THE
7	AWARD PERIOD. THIS IS SOMETHING WE CAN NEGOTIATE IF
8	THERE'S A SUCCESSFUL APPLICANT.
9	MR. SHESTACK: DO THE MATCHING FUNDS NEED
10	TO COME FROM CALIFORNIA?
11	DR. OLSON: NO. THE MATCHING FUNDS DO NOT
12	NEED TO BE SPENT IN CALIFORNIA. THAT'S THE POINT OF
13	IT.
14	MR. SHESTACK: THEY DON'T NEED TO
15	ORIGINATE IN CALIFORNIA EITHER?
16	DR. OLSON: NO, THEY DO NOT. THE MATCHING
17	FUNDS CAN COME FROM WHEREVER.
18	SO JUST TO GIVE YOU AN EXAMPLE OF WHAT WE
19	MEAN BY THAT, IF THE PROGRAM AS PROPOSED TO REACH
20	THE GOAL OF THE RFA IS A \$40 MILLION PROGRAM, THE
21	CIRM FUNDING WOULD BE \$20 MILLION. IF THE PROGRAM
22	AS PROPOSED TO MEET THE GOAL OF THE APPLICATION IS A
23	\$75 MILLION PROGRAM, CIRM FUNDING WILL BE 25
24	MILLION, AND THE APPLICANT WILL BE EXPECTED TO
25	INDICATE HOW THEY CAN COME UP WITH THE OTHER 50
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1	MILLION AND WHAT THAT'S FOR.
2	SO THIS WILL BE AN ACTIVITY. THERE WILL
3	BE AN ACTIVITY CIRM FUNDING WILL BE 25 MILLION OF
4	A \$75 MILLION PROGRAM AND THE OTHER 50 MILLION WILL
5	BE THE RESPONSIBILITY
6	MS. SAMUELSON: THIS IS JOAN. SORRY TO
7	INTERRUPT. CAN I BE HEARD ON THIS LINE NOW?
8	MS. KING: JOAN, CAN YOU HEAR US?
9	MS. SAMUELSON: YES, I CAN. SOUNDS LIKE
10	YOU CAN HEAR ME ON THIS LINE NOW. GREAT. JON
11	SHESTACK IS ALSO TRYING TO BE HEARD, I THINK.
12	CHAIRMAN KLEIN: JOAN, WE JUST HEARD FROM
13	JONATHAN. HE ASKED A QUESTION WHICH WAS ANSWERED.
14	MR. SHESTACK: THEY CAN HEAR ME NOW.
15	WHATEVER THE PROBLEM WAS ON THE LINE IS FINE.
16	DR. OLSON: SO THERE WILL BE AN
17	ACTIVITY-BASED BUDGET, SO WE WILL KNOW WHAT
18	ACTIVITIES WILL BE FUNDED BY CIRM, WHAT ACTIVITIES
19	WILL BE FUNDED BY THE APPLICANT THEMSELVES OR BY THE
20	SUCCESSFUL APPLICANT. SO THAT WILL BE PART OF THIS
21	PROGRAM.
22	I REITERATE AGAIN THERE WILL BE AN ACTIVE
23	IND BEFORE THE ISSUANCE OF NOTICE OF AWARD. THEY
24	HAVE TO BE ABLE TO ENROLL PATIENTS BY THE TIME THEY
25	START THIS PROGRAM IN ORDER TO REALLY REALISTICALLY

1	HAVE A CHANCE OF BEING ABLE TO COMPLETE THE GOAL OF
2	THE PROGRAM WITHIN THREE YEARS, SO I THINK THAT'S
3	APPROPRIATE.
4	AND THEN WE WOULD PROPOSE THAT WE COMMIT
5	UP TO \$50 MILLION TO THE PROGRAM OVERALL TO FUND ONE
6	TO TWO MERITORIOUS PROGRAMS.
7	THE AWARD MECHANISM WOULD BE A LOAN IF A
8	FOR-PROFIT ORGANIZATION IS THE APPLICANT
9	ORGANIZATION. AND I WOULD POINT OUT THAT WHATEVER
10	ORGANIZATION IS THE IND, ANOTHER WAY TO LOOK AT
11	WHAT'S HERE IS WHATEVER ORGANIZATION IS THE IND
12	HOLDER IS THE APPLICANT ORGANIZATION. SO I THINK
13	THAT'S A FAIR THING. AND, AGAIN, IF THE FOR-PROFIT
14	HOLDS THE IND, THEN THE PI OBVIOUSLY HAS TO BE AN
15	EMPLOYEE OF THE FOR-PROFIT ORGANIZATION. AND AS
16	USUAL, IF THE PI IS FROM A NONPROFIT OR AN ACADEMIC
17	ORGANIZATION THAT HOLDS THE IND, THAT WOULD BE A
18	GRANT.
19	THE PROVISIONAL TIMETABLE IS RELEASE OF
20	THE RFA, I'D SAY, EARLY MAY. LOI DUE IN JUNE.
21	APPLICATIONS DUE IN JULY. REVIEW OF APPLICATIONS IN
22	OCTOBER. I'M SITTING HERE LOOKING AT OUR REVIEW
23	SCHEDULE, SEPTEMBER, OCTOBER, NOVEMBER. SO IT WILL
24	BE A BUSY TIME FOR REVIEWERS. AND ICOC APPROVAL FOR
25	FUNDING IN DECEMBER.

1	SO WHAT I'D LIKE TO DO IS REQUEST APPROVAL
2	OF THE CONCEPT PLAN FOR THE CIRM TARGETED CLINICAL
3	DEVELOPMENT AWARD WITH A BUDGET OF UP TO 50 MILLION,
4	AND I'D BE HAPPY TO TAKE ANY QUESTIONS.
5	CHAIRMAN KLEIN: THANK YOU, DR. OLSON, FOR
6	THIS PRESENTATION. OBVIOUSLY THIS IS A GREAT
7	MILESTONE FOR THIS AGENCY.
8	I'D LIKE AS A FRAMEWORK FOR THIS
9	DISCUSSION TO SUGGEST THAT SINCE THIS IS THE FIRST
10	PROGRAM OF THIS TYPE, I'D LIKE US TO CONSIDER THESE
11	MILESTONES AND ANY MOTION IN THE CONTEXT OF GIVING
12	THE PRESIDENT SOME DISCRETION. AS WE GO THROUGH THE
13	PROCESS AND THE APPLICATIONS, WE MAY BE IN A
14	SITUATION, FOR EXAMPLE, WHERE YOU HAVE A PI AT 20
15	AND A CO-PI AT 30 PERCENT. I DON'T THINK THAT'S THE
16	KIND OF THING THAT SHOULD PREVENT AN APPLICATION
17	THAT THE PRESIDENT THINKS IS MERITORIOUS FROM COMING
18	IN.
19	SO I WOULD REALLY ENCOURAGE US THAT USING
20	THESE AS GUIDELINES FOR THE PRESIDENT TO HAVE SOME
21	DISCRETION AND REFINING THEM, AND IN INTERFACING
22	WITH WHAT IS ACTUALLY ACCEPTED NOT TO HAVE SOME
23	TECHNICAL DEVIATION THAT IS NOT SUBSTANTIVE DEFEAT
24	AN OTHERWISE MERITORIOUS PROPOSAL.
25	DR. PRIETO.
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Т	DR. PRIETO: IT SEEMS TO ME THAT, IF I
2	UNDERSTAND CORRECTLY, THERE HAS TO BE BOTH AN IND,
3	AN ACTIVE IND APPLICATION, AND FUNDING FROM OTHER
4	SOURCES IN HAND BEFORE ANY CIRM MONEY WOULD GO TO
5	THE GRANTEE; IS THAT CORRECT?
6	DR. OLSON: WELL, NO, I DIDN'T SAY THAT
7	THE APPLICANT HAD TO HAVE FUNDS IN HAND.
8	DR. PRIETO: COMMITMENTS.
9	DR. OLSON: AS WE HAVE DONE WITH OTHER
10	ORGANIZATIONS, WE DISCUSS WHAT MONEY IS AVAILABLE.
11	THERE CAN BE MADE MILESTONES CAN BE PUT IN PLACE
12	TO SAY THEY MUST HAVE X AMOUNT OF FUNDING BY X DATE.
13	YOU KNOW, ONE CAN COME UP WITH FINANCIAL MILESTONES.
14	DR. PRIETO: IT JUST SEEMED TO ME TO BE
15	PRETTY CHALLENGING THRESHOLDS, AND I WONDER IF WE
16	HAVE SOME IDEA OF HOW MANY ACTUAL CANDIDATES THERE
17	MIGHT BE OUT THERE.
18	DR. OLSON: THERE WILL BE VERY FEW
19	APPLICANTS, I WOULD ANTICIPATE, FOR THIS RFA.
20	DR. TROUNSON: IT'S LIKELY TO BE AS FAR
21	AS WE KNOW, LIKELY TO BE A MAXIMUM OF THREE, BUT
22	SOMETIMES IT'S SURPRISING, THAT YOU SUDDENLY HAVE
23	ANOTHER ONE THAT APPEARS VERY QUICKLY, PARTICULARLY
24	IN THIS SPACE WHERE PEOPLE TEND TO DO SOME OF THE
25	PRELIMINARY WORK AT A LEVEL BELOW THE RADAR, SO TO

1	SPEAK. SO IT WAS ONE OF THE THINGS THAT WE REALLY
2	WANTED TO FIND OUT HOW MANY WERE IN THAT SPACE, BUT
3	WE KNOW THAT THERE ARE THREE THAT COULD APPLY.
4	MS. SAMUELSON: ON THAT NOTE, ARE THERE
5	GRANTEE PROSPECTIVE GRANTEES INDICATED THAT THEY
6	WOULD MEET THESE GRANT CRITERIA, THEY WOULD BE
7	ENTHUSIASTIC ABOUT APPLYING FOR SUCCESSFUL GRANTS?
8	DR. TROUNSON: I THINK PRETTY MUCH THAT'S
9	RIGHT, JOAN. BUT IF YOU ASK, IF YOU ACTUALLY ASK A
10	PARTICULAR COMPANY FOR DETAILS, WHICH IS NOT WHAT WE
11	DO, I THINK THEY MIGHT SUGGEST, YOU KNOW, RELAXATION
12	OF THIS, THAT, AND THE OTHER, OR SOME CHANGE. BUT I
13	THINK THIS REPRESENTS A REASONABLY ATTRACTIVE IT
14	WOULD BE REASONABLY ATTRACTIVE FOR AT LEAST TWO OR
15	THREE OF THOSE ENTITIES THAT CURRENTLY HAVE AN IND
16	FILED TO BE INTERESTED IN IT.
17	WHETHER THERE'S SOMETHING IN OUR IP
18	REGULATIONS OR OTHERWISE THAT WILL PREVENT THEM, WE
19	CAN'T TELL. I'M NOT AT THAT STAGE. IT CAN'T GET
20	DOWN TO THOSE KIND OF DETAILS AND WON'T UNTIL WE
21	RELEASE THE APPLICATION. IT'S INAPPROPRIATE TO GO
22	TOO DEEP ON THAT.
23	CHAIRMAN KLEIN: BEFORE ANYONE BRINGS UP
24	ANY HYPOTHETICAL EXAMPLE OF ANYTHING WE'VE
25	PREVIOUSLY FUNDED, PLEASE REMEMBER ONLY BRING UP

1	EXAMPLES THAT YOU ARE NOT IN CONFLICT WITH IN ANY
2	WAY.
3	I BELIEVE DR. STEWARD HAS A POINT AND THEN
4	DR. FRIEDMAN AND THEN JEFF SHEEHY.
5	DR. STEWARD: THANK YOU. THIS HAS BEEN, I
6	THINK, A VERY IMPORTANT CONCEPT COMING FORWARD.
7	IT'S PROBABLY ONE OF THE MOST IMPORTANT THINGS THAT
8	WE'RE SEEING, AND I WANT TO CONGRATULATE YOU ON
9	REALLY A VERY CAREFUL AND THOUGHTFUL PLAN HERE.
10	THERE ARE A COUPLE OF THINGS THAT DO WORRY
11	ME JUST A LITTLE BIT, AND I'LL EXPRESS THOSE. AND
12	IT MAINLY HAS TO DO WITH THE LIMITS AND THE DANGER
13	OF LOSING SOMETHING REALLY GOOD BECAUSE OF THOSE
14	LIMITS. SO AN EXAMPLE MIGHT BE THE SPECIFIC DATES
15	OF THE PROPOSAL. I THINK THERE'S AN EASY FIX FOR
16	THIS. FOR EXAMPLE, IF SOMEBODY WAS ABLE TO COME IN
17	WITH AN IND FILING A WEEK AFTER THE DEADLINE FOR THE
18	GRANT SUBMISSION, WOULDN'T THAT BE A PITY IF THAT
19	WAS THE ONE THAT WAS REALLY THE HOME RUN?
20	I WONDER IF THERE'S A WAY TO DO A ROLLING
21	APPLICATION PROCESS INSTEAD OF A SINGLE APPLICATION
22	PROCESS. WE WOULD HAVE A LITTLE BIT OF A SPAN HERE.
23	DR. TROUNSON: WE COVERED TO SOME EXTENT
24	UNDER THE SUP FOR THEM TO BE ABLE TO PROVIDE US
25	SUPPLEMENTAL MATERIAL UP UNTIL THE CONSIDERATION BY

1	THE GRANTS REVIEW TEAM. I THINK YOU HAVE TO
2	PROBABLY HAVE AN IND FILED IN PLACE BY THAT STAGE.
3	OTHERWISE YOU'RE MOST UNLIKELY TO HAVE IT A LITTLE
4	FURTHER ON. BUT WE'RE NOT AWARE OF ANYONE THAT
5	MIGHT BE IN THAT STATE. AS I SAID, PERHAPS IT COULD
6	HAPPEN, BUT AT LEAST UP UNTIL THE ACTUAL TIME THAT
7	THE GRANT REVIEW TEAM WOULD EXAMINE THE PROPOSALS,
8	THEY'RE ABLE TO BRING FORWARD.
9	DR. STEWARD: WHAT I'M REALLY ASKING IS
10	WOULD IT BE POSSIBLE TO HAVE A COUPLE OF DIFFERENT
11	TIMES WHERE THE GRANT REVIEW TEAM COULD EXAMINE THE
12	PROPOSALS.
13	DR. OLSON: I DO WANT TO POINT OUT THAT
14	THE YOU KNOW, THE DISEASE TEAM II WOULD ALSO
15	ENCOMPASS THIS SPACE, WILL BE COMING A FEW MONTHS
16	LATER; AND DEPENDING ON HOW WE, SAY, FIX THE
17	PRIORITIES, I MEAN JUST SAY THERE'S A PROGRAMMATIC
18	INTEREST IN PLURIPOTENT STEM CELLS, BUT I THINK THAT
19	ONE WOULD BE BROADER. IN OTHER WORDS, ANYBODY COULD
20	COME IN FOR THAT. CERTAINLY A PLURIPOTENT
21	CELL-DERIVED THERAPY WOULD NOT BE RESTRICTED FROM
22	THAT ONE SEEING AS THAT ONE'S REALLY QUITE CORE TO
23	OUR MISSION AND TO THAT PARTICULAR STRATEGIC GOAL.
24	SO I THINK BOTH THE SUPPLEMENTAL DATA
25	POLICY AS WELL AS THE TIMING OF THE SUBSEQUENT

1	DISEASE TEAM II RFA WOULD ADDRESS BOTH OF YOUR
2	CONCERNS.
3	CHAIRMAN KLEIN: DR. STEWARD, I THINK WE
4	HAVE A CLARIFICATION EFFECTIVELY FOR THE RECORD THAT
5	DR. TROUNSON HAS MADE, THAT THE IND WOULD NEED TO BE
6	IN PLACE THE FILING WOULD NEED TO BE IN PLACE BY
7	THE GRANT REVIEW AS VERSUS THE SUBMISSION OF THE
8	GRANT.
9	DR. STEWARD: THAT HELPS.
10	DR. OLSON: THREE WEEKS BEFORE.
11	DR. STEWARD: IF I COULD JUST ASK ANOTHER
12	QUESTION. AGAIN, IT SORT OF RELATES TO THIS ISSUE
13	OF CUTTING OUR SAMPLE TOO SHORT. WE'VE SEEN THAT
14	SOME THINGS HAVE GONE FORWARD AND ACTUALLY GOTTEN
15	FDA APPROVAL AND THEN BEEN PUT ON CLINICAL HOLD.
16	THE TIMING OF THAT, NONE HAVE BEEN RELEASED, SO WE
17	DON'T KNOW HOW LONG THAT PROCESS IS GOING TO TAKE
18	FOR ANY OF THE PROJECTS UNDER WAY NOW OR FOR
19	PROJECTS IN THE FUTURE. IS THERE SOMETHING BUILT IN
20	THAT WILL
21	DR. OLSON: YES. THE MECHANISM THAT'S
22	BUILT IN TO DEAL WITH THAT AS YOU RIGHTLY POINT
23	OUT, THE ONES THAT WE ARE AWARE OF THAT HAVE FILED
24	IND'S IN THIS SPACE ARE ON CLINICAL HOLD CURRENTLY.
25	BUT WHAT WOULD HAPPEN IS WE WOULD REQUIRE AN ACTIVE
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1	IND AT THE NOTICE OF AWARD. TYPICALLY WE ASK THAT
2	PEOPLE INITIATE THEIR PROGRAMS; THAT IS, THE NOTICE
3	OF AWARD BE ISSUED WITHIN SIX MONTHS OF THE DECISION
4	BY THIS BOARD TO FUND. SO THAT ALREADY PUTS YOU,
5	YOU HAVE NOW FROM APPLICATION DEADLINE WHEN YOU
6	FILED YOUR IND TO ARGUABLY SIX MONTHS AFTER THE
7	BOARD HAS APPROVED AN APPLICATION.
8	AND THERE'S ALSO IF THEY CAN APPLY FOR
9	SPECIAL CONSIDERATION TO THE PRESIDENT TO EXTEND
10	THAT SIX-MONTH DEADLINE. SO THERE IS A MECHANISM IN
11	PLACE TO ADDRESS THE FACT THAT, YOU KNOW, IT'S VERY
L 2	HARD TO PREDICT WHEN A HOLD WILL BE LIFTED, BUT
13	THAT'S HOW WE WORK WITH THAT.
L 4	CHAIRMAN KLEIN: THANK YOU. I THINK WE
15	HAVE DR. TROUNSON.
16	DR. TROUNSON: I THINK THEY ARE GOOD
17	QUESTIONS, OS. IN DOING THIS AT THE TIME WITH THE
18	DISEASE TEAM FOLLOWING UP, YOU KNOW, I AM CONCERNED
19	ABOUT TRYING TO GET ONTO THE FRONT FOOT FOR OUR
20	MISSION BECAUSE WE'RE MEANT TO HAVE A PLURIPOTENTIAL
21	STEM CELL INITIATIVE THROUGH THAT II A, II B PROCESS
22	IN TIME, AND TIME'S PASSING. SO THEY DON'T ALL MAKE
23	IT. SO THERE'S SOME SENSE OF URGENCY TO SORT OF
24	HELP THOSE THAT ARE NEAR THE FRONT LINE IF WE'RE
25	GOING TO MEET OUR MISSION TARGETS. BRINGING THE

1	OTHERS THROUGH BEHIND, WE MAY NOT MEET OUR MISSION.
2	BUT IF WE'VE GOT SOME OF THE FRONT LINE AND IF THEY
3	MAKE IT, OF COURSE, THEN WE'RE ABLE TO CEMENT IN
4	SOME OF THE KEY MISSION OBJECTIVES.
5	AND HOPEFULLY, IMPORTANTLY, I THINK IN
6	DOING THAT WE WILL LEARN SO MUCH FROM THESE PEOPLE
7	IN THE FRONT LINE ABOUT HOW TO HELP THOSE PEOPLE
8	COMING BEHIND. AND THAT WILL BE GETTING THAT
9	INFORMATION FROM WHAT IS REQUIRED TO GET THROUGH
10	THIS RATHER DIFFICULT PATHWAY, BECAUSE IT HASN'T
11	BEEN TRAVELED REALLY BY ANYONE, IS SO CRITICAL FOR
12	US TO HELP THE UP-AND-COMING PROGRAMS THAT ARE A
13	LITTLE FURTHER BACK.
14	CHAIRMAN KLEIN: THANK YOU. DR. FRIEDMAN.
15	DR. FRIEDMAN: I THINK THIS IS A VERY GOOD
16	IDEA. AND MY ONLY QUESTION AND CONCERN REALLY IS
17	ABOUT THE TIMING. YOU SAY THAT THERE ARE RELATIVELY
18	FEW THAT YOU KNOW OF. AND WHILE YOU DON'T KNOW OF
19	ALL OF THEM, YOU KNOW OF MANY OF THEM ANYWAY. I
20	THINK THAT IF WE WEREN'T GOING TO HAVE THE DISEASE
21	TEAM II COMING UP JUST BEHIND IT, I WOULDN'T BE
22	MAKING THE SUGGESTION TO YOU THAT WE CONSIDER
23	DELAYING THIS BY A YEAR.
24	MY RATIONALE GOES SOMETHING LIKE THIS.
25	EVERYTHING THAT YOU HOPE TO DO WITH THIS YOU COULD

1	SWEEP INTO DISEASE TEAM II. AND SINCE WE KNOW THERE
2	ARE RELATIVELY FEW CANDIDATES, BY SIGNALING TO THE
3	GENERAL COMMUNITY, BOTH ACADEMIC AND INDUSTRIAL, THE
4	INTENTION TO DO THIS, YOU REALLY GIVE PEOPLE A
5	TARGET TO SHOOT FOR. I TAKE, OS, YOUR POINT ABOUT
6	TIMING IS TOUGH. I DON'T SEE HOW YOU CAN HAVE A
7	ROLLING SET OF REVIEWS. ALTHOUGH IT'S VERY
8	ATTRACTIVE, I THINK WE JUST DON'T HAVE ENOUGH MONEY
9	TO DO IT.
10	YOU POINT OUT THAT THESE ARE HIGH RISK.
11	THAT DOESN'T MEAN I'M DISINTERESTED. IT MEANS I
12	ACTUALLY LIKE IT. BUT IT DOES MEAN THAT I WOULD
13	LIKE TO HAVE THE LARGEST NUMBER OF CREATIVE
14	APPLICATIONS READY TO GO. SO I'M VERY SUPPORTIVE OF
15	THIS, BUT I PERSONALLY HAVE RESERVATIONS ABOUT DOING
16	IT RIGHT NOW AND THINK THAT ANOTHER YEAR OF
17	MATURATION WILL MEAN THAT THE POOL OF CANDIDATES TO
18	COMPETE FOR THIS, I CAN'T PROMISE YOU IT WILL BE
19	BETTER, BUT I SUSPECT THAT IT'S LIKELY TO BE VERY
20	MUCH BETTER.
21	CHAIRMAN KLEIN: SO, DR. FRIEDMAN, I THINK
22	DR. TROUNSON'S SIGNAL POINT HERE IS THAT BY FUNDING
23	SOME LEAD CANDIDATES, WE EDUCATE THE ENTIRE POOL TO
24	FOLLOW, AND THAT THAT LEAD CANDIDATE FUNCTION OF
25	EXPLORING THE OBSTACLES AND GIVING US EARLY

1	INFORMATION OF WHERE THOSE OBSTACLE ARE MAY INFORM
2	ADDITIONAL BASIC RESEARCH WE NEED TO HAVE AS
3	COMPLEMENTARY OR TRANSLATIONAL COMPLEMENTARY
4	RESEARCH.
5	DR. FRIEDMAN: I DO APPRECIATE THAT FACT.
6	OF COURSE, THAT MAY WELL BE TRUE. MY CONCERN,
7	THOUGH, IS THAT FROM A REGULATORY POINT OF VIEW, THE
8	REGULATORS MAY SIMPLY SAY WHEN YOU'VE SEEN ONE IND,
9	YOU'VE SEEN ONE IND. AND I'M NOT SURE HOW MUCH IS
10	GOING TO BE TRANSFERABLE FROM ONE TO THE NEXT. I
11	COULD BE VERY WRONG ABOUT THAT. I THINK IT'S A
12	VALID POINT YOU ARE MAKING. I'M NOT SO CONVINCED BY
13	IT, BUT, YOU KNOW, WE WON'T KNOW.
14	DR. TROUNSON: I THINK THERE ARE TWO
15	POINTS THAT I'D LIKE TO MAKE IN RESPONSE, MICHAEL.
16	ONE IS I'M AWARE OF TWO OF THESE ENTITIES MAY NOT BE
17	ABLE TO CONTINUE, AND THAT WOULD MEAN THAT THEY GOT
18	THERE AND THEY FELL BACKWARDS. NOW, WHETHER THAT'S
19	TRUE OR NOT, I'M NOT A FINANCIAL ANALYST OF ANY
20	KIND. BUT THERE ARE WARNING SIGNS THAT WITHOUT SOME
21	ASSISTANCE, SO THEY'RE GOING FIND IT REALLY, REALLY
22	HARD. NO. 1, I DON'T WANT TO LOSE THAT IF IT'S AN
23	EDGE JUST TO HELP.
24	SECONDLY, I THINK IN TERMS OF SOME OF THE
	,
25	MANUFACTURING AND SOME OF THE CELL CHARACTERISTIC

1	ISSUES, THERE HAVE BEEN SOME SURPRISES BY THE
2	FRONTLINE GROUPS IN HAVING TO DEMONSTRATE SOME
3	PARTICULAR CHARACTERISTICS, AS YOU MIGHT IMAGINE.
4	AND THEY HAVE BEEN HELPED ACROSS THE LINE BY HAVING
5	TO ADDRESS THOSE, AND THEY'RE CLEARLY WILLING, AT
6	LEAST IN DISCUSSION WITH ME, THAT IF THEY'RE ABLE TO
7	BE AWARDED, THAT THEY WOULD HELP IN THESE REGARDS.
8	AND SO I DO THINK THAT THEY'VE GOT SOME SPECIFIC
9	INFORMATION THAT'S NOT CURRENTLY PUBLIC.
10	DR. FRIEDMAN: EXPLAIN TO US, THEN, WHY
11	THIS WOULDN'T BE CAPTURED UNDER THE DISEASE TEAM
12	RESEARCH II.
13	DR. TROUNSON: IT COULD BE CAPTURED UNDER
14	THAT, BUT IT WOULD BE SIGNIFICANTLY LATER. AND I'M
15	CONCERNED ABOUT THE NEED TO DO IT EARLIER RATHER
16	THAN LATER. THE LATER ONE WITH THE DISEASE TEAMS,
17	OF COURSE, WILL, I IMAGINE, PROBABLY BE A WIDER
18	BRIEF THAN PLURIPOTENTIALITY. BUT I'M A LITTLE
19	CONCERNED ABOUT THE HEALTH OF THESE ENTITIES THAT
20	ARE UP THERE AT THE MOMENT, AND THEY MAY NOT, FOR
21	EXAMPLE, BE ABLE TO SURVIVE A LONG TIME WITHOUT SOME
22	SUPPORT.
23	CHAIRMAN KLEIN: JEFF SHEEHY.
24	MR. SHEEHY: I'M GOING TO TAKE THE EXACT
25	OPPOSITE TACK OF DR. FRIEDMAN. I JUST WANT TO SAY

1	HOW IMPRESSED I AM WITH DR. OLSON, DR. TROUNSON, AND
2	STAFF. THIS IS WHAT PATIENT ADVOCATES HAVE BEEN
3	PLEADING FOR. AND THE WAY IN WHICH THEY PUT THIS
4	TOGETHER, I KNOW WHAT THEIR SCHEDULE LOOKS LIKE FOR
5	THE REST OF THE YEAR BECAUSE I'M GOING TO BE AT
6	THOSE REVIEW MEETINGS. I'M WONDERING HOW I'M GOING
7	TO GET THERE. SO I AM SO PROUD OF OUR TEAM, AND I'M
8	SO PROUD OF THE WORK THEY'VE DONE. AND THIS
9	AGGRESSIVENESS, THIS URGENCY IS EXACTLY WHAT WE NEED
10	TO DO.
11	SO I HAD TWO QUESTIONS. AND ONE IS JUST
12	CLARIFICATION. THIS IS JUST ME. I DIDN'T REALLY
13	UNDERSTAND WHAT YOU MEANT BY PIVOTAL. I'M SURE FOR
14	A LOT OF FOLKS THAT WAS JUST SELF-EVIDENT. AND I
15	JUST WANTED TO HAVE A SENSE, ALMOST LIKE A
16	DEFINITION BECAUSE I KNOW PHASE I, PHASE II, PHASE
17	III.
18	DR. OLSON: PIVOTAL IS STATISTICALLY
19	IT'S TYPICALLY A PHASE III, BUT SOMETIMES IT CAN BE,
20	IN CERTAIN ONCOLOGY INDICATIONS OR IN SOME
21	CIRCUMSTANCES, IT CAN BE A PHASE II. BASICALLY IT'S
22	A STUDY THAT MEETS AN END POINT THAT'S AGREED TO
23	WITH THE FDA THAT SHOWS BENEFIT TO PATIENTS. SO
24	IT'S AN EFFICACY END POINT THAT'S ACCEPTED IN ENOUGH
25	PATIENTS.

1	IT'S THE BASIS FOR MARKETING APPROVAL.
2	CHAIRMAN KLEIN: THAT DOES NOT ELIMINATE
3	FUNDING PHASE II A STUDIES FOR PRELIMINARY EFFICACY.
4	DR. OLSON: NO. I'M CLASSIFYING PHASE
5	II A STUDIES WITH PRELIMINARY INDICATIONS OF
6	EFFICACY WITHIN THE CONTEXT OF THE SCOPE OF THIS
7	RFA.
8	MR. SHEEHY: THAT MAKES PERFECT SENSE. I
9	KNOW WHAT IT MEANS TO FUND MOST OF THOSE STUDIES. I
10	THINK THAT'S NOT WITHIN OUR REALM. AGAIN, NOT TO
11	PUT ANYTHING ELSE ON YOU GUYS BECAUSE I AM SO
12	IMPRESSED. I REALLY HAVE THIS INCREDIBLE SENSE OF
13	PRIDE IN OUR SCIENTIFIC TEAM IN TAKING ON THIS
14	CHALLENGE.
15	AS WE LEARN ABOUT THIS, I HOPE THAT WE
16	CAN I'M TALKING ABOUT A YEAR FROM NOW SOME
17	MECHANISM TO LINK THIS TO THE DISEASE TEAMS THAT WE
18	HAVE ONGOING IF THEY HAPPEN TO REACH AN IND. SO IF
19	THERE'S SOME SYNCHRONICITY SO THAT, YOU KNOW, MAYBE
20	THEY HAVE SOME MONEY LEFT OVER, MAYBE THAT CAN APPLY
21	TO SOME JUST SOMETHING SO THAT WE CAN BE REALLY
22	SEAMLESS. BUT, AGAIN, I JUST THINK THIS IS
23	SPECTACULAR AND THANK YOU.
24	DR. OLSON: THANK YOU. WE'RE ALREADY
25	THINKING THAT WAY.

1	CHAIRMAN KLEIN: SO, DR. PRIETO, DID YOU
2	HAVE A COMMENT?
3	DR. PRIETO: TO MAKE A MOTION ACCEPTING
4	THIS CONCEPT PROPOSAL FOR AN RFA.
5	CHAIRMAN KLEIN: IF YOU COULD MAKE A
6	MOTION, THEN I'M GOING TO WALK ON TO ADDITIONAL
7	BOARD COMMENT.
8	DR. PRIETO: SO MOVED.
9	CHAIRMAN KLEIN: SO THERE'S A MOVE. FOR
10	THE TRANSCRIPTION THAT'S BEING MADE ON THE AUDIO
11	FILE, WOULD YOU PLEASE IDENTIFY WHO THE SECOND IS?
12	DR. LOVE: TED LOVE.
13	CHAIRMAN KLEIN: THANK YOU VERY MUCH. DR.
14	PULIAFITO, I BELIEVE YOU HAD A COMMENT.
15	DR. PULIAFITO: CAN YOU GIVE US A SENSE OF
16	THE KIND OF PROPOSALS THAT YOU SEE OUT THERE THAT
17	MIGHT MEET ALL THE CONSTRAINTS OF THIS REQUEST?
18	DR. TROUNSON: THERE'S A RATHER SMALL
19	NUMBER OF THEM, SO I'M HESITANT.
20	CHAIRMAN KLEIN: IT'S BETTER FOR PURPOSES
21	OF CONFLICTS AND OTHER ISSUES THAT WE NOT IDENTIFY
22	THOSE SPECIFICALLY BECAUSE THEN WE'D HAVE TO DO A
23	CONFLICTS CLEARANCE.
24	DR. PULIAFITO: THAT'S MY POINT EXACTLY.
25	WHAT I'M CONCERNED ABOUT IS, AS I LOOK AT THE

1	CONSTRAINTS, THE UNIVERSE OF POSSIBLE APPLICATIONS
2	WILL BE RATHER SMALL. SO I'M CONCERNED THAT WE'RE
3	NOT THAT WE MAY BE FAVORING THESE EARLY
4	INDIVIDUALS WITHOUT HAVING, WHAT DR. FRIEDMAN SAID,
5	MORE TIME TO HAVE BROADER PROPOSALS. WHAT I'M
6	CONCERNED ABOUT IS ARE WE REALLY LOOKING AT AN
7	EARMARK OF MONEY FOR THESE?
8	CHAIRMAN KLEIN: NO, WE'RE NOT. WHAT
9	WE'RE DOING HERE IS, WHILE ANECDOTALLY THE PRESIDENT
10	IS AWARE OF A FEW CASES, WHICH HE CAN VET TO TRY AND
11	MAKE SURE THAT THERE'S A REAL NEED THERE, AS DR.
12	TROUNSON INDICATED, THERE MAY BE A SIGNIFICANTLY
13	GREATER NUMBER WHO ACTUALLY APPLY. IN FACT, I HAVE
14	A COMMENT LATER TO ADDRESS AN ADDITIONAL SUBCATEGORY
15	HERE. BUT, AGAIN, THIS IS TO TRY AND CREATE A LEAD
16	GROUP OF CANDIDATES THAT HELP EDUCATE ALL OF US.
17	DR. OLSON.
18	DR. OLSON: I JUST WANT TO MAKE ONE POINT.
19	IN CLINICAL DEVELOPMENT IT IS GOING TO BE IMPORTANT
20	TO HAVE A PIPELINE OF PROGRAMS. WE ARE GOING TO
21	HAVE TO ROUTINELY WE WERE GOING TO REPEAT A
22	DISEASE TEAM EVERY YEAR. THAT DISEASE TEAM, AS
23	WE'RE CURRENTLY THINKING OF IT, WILL INCLUDE
24	PROGRAMS WHERE AN END POINT MIGHT BE ENROLLING THE
25	FIRST PATIENTS, SO IT WOULD INCLUDE THE PRECLINICAL

1	DEVELOPMENT PHASE AND FILING THE IND. IT COULD HAVE
2	AN END POINT OF A PHASE II A. THAT COULD BE ANOTHER
3	END POINT FOR IT. SO IT COULD CAPTURE IN A BUNCH
4	IN SEVERAL AREAS.
5	BUT WE NEED TO BE ABLE TO PICK UP PEOPLE
6	WHEN THEY ARE READY. AND, THEREFORE, IT IS
7	IMPORTANT TO HAVE A REPEATING TYPE OF RFA OF THIS
8	NATURE, WHETHER IT BE DISEASE TEAM OR THIS ONE THAT
9	IS SPECIFICALLY TARGETED TO AN ASPIRATIONAL
10	OBJECTIVE THAT WE HAVE, AND TO PICK UP PEOPLE AS
11	THEY COME ALONG.
12	CHAIRMAN KLEIN: AND SO, DR. PULIAFITO,
13	I'D ALSO REMIND YOU THAT THE BOARD HAS ALREADY ASKED
14	THE STAFF TO COME BACK IN TERMS OF DISEASE TEAM I
15	WHERE THE RESEARCH GOES FASTER THAN ANTICIPATED AND
16	WHERE THEY HAVE LEFTOVER FUNDS FOR RECOMMENDATIONS
17	ON HOW WE CAN MODIFY DISEASE TEAM I'S SO CARRY-OVER
18	FUNDS COULD BE USED TO BEGIN A PHASE I TRIAL. SO
19	WE'RE GOING TO HAVE A NUMBER OF PROGRAMS AND
20	MODIFIED PROGRAMS AS WE GO TO TRY AND BROADEN THIS
21	FIELD. THIS IS AN INITIAL STEP.
22	DR. PULIAFITO: IS IT REASONABLE, AS DR.
23	STEWARD SUGGESTED, TO HAVE THIS AS A ROLLING PROCESS
24	OR NOT REALLY?
25	DR. TROUNSON: I THINK WE'RE GOING TO PICK

1	THAT UP IN THE DISEASE TEAMS. YOU CAN ARGUE THAT
2	YOU MIGHT ARGUE, AND IT MIGHT BE WORTH DISCUSSING
3	THAT AT SOME POINT, THAT THE PLURIPOTENTIAL STEM
4	CELLS IN COMPETITION WITH EVERYTHING ELSE MIGHT
5	REALLY BE CHALLENGED. BUT THEY SEEM TO HAVE BEHAVED
6	COMPETITIVELY RATHER WELL UP UNTIL NOW. I THINK
7	IT'S REASONABLE. BUT SO I THINK DISEASE TEAMS CAN
8	ACCOMMODATE THAT SCOPE BECAUSE WE'VE PUSHED
9	TRANSLATION UP A BIT AND WE'VE GOT THE DISEASE TEAMS
10	IN PROCESS PHASE. WE WANT TO TRY AND DO THEM, THE
11	DISEASE TEAMS, EVERY 12 OR AT THE MOST 15 MONTHS,
12	BUT GET THEM INTO THAT FRAMEWORK. I THINK WE CAN
13	HANDLE IT.
14	AGAIN, MY VIEW, YOU EMPLOYED ME TO GET YOU
15	THE MISSION. I NEED THIS TO HELP DELIVER ON IT IN
16	MY OWN VIEW. SO THAT'S WHY THE STAFF ARE PUTTING
17	THIS IN A VERY POSITIVE WAY. I THINK IT IS A
	THIS IN A VERY POSITIVE WAY. I THINK IT IS A POSSIBILITY THAT WE GET NONE, THAT THEY MAY NOT PASS
17 18 19	
18	POSSIBILITY THAT WE GET NONE, THAT THEY MAY NOT PASS
18 19	POSSIBILITY THAT WE GET NONE, THAT THEY MAY NOT PASS MUSTER, WHATEVER. YOU TAKE THAT RISK, BUT I THINK
18 19 20	POSSIBILITY THAT WE GET NONE, THAT THEY MAY NOT PASS MUSTER, WHATEVER. YOU TAKE THAT RISK, BUT I THINK WE'VE GOT GO OUT THERE AND SEE WHO'S READY TO GO ON
18 19 20 21	POSSIBILITY THAT WE GET NONE, THAT THEY MAY NOT PASS MUSTER, WHATEVER. YOU TAKE THAT RISK, BUT I THINK WE'VE GOT GO OUT THERE AND SEE WHO'S READY TO GO ON THIS. WE KNOW THAT THERE ARE SOME PEOPLE OUT THERE
18 19 20 21	POSSIBILITY THAT WE GET NONE, THAT THEY MAY NOT PASS MUSTER, WHATEVER. YOU TAKE THAT RISK, BUT I THINK WE'VE GOT GO OUT THERE AND SEE WHO'S READY TO GO ON THIS. WE KNOW THAT THERE ARE SOME PEOPLE OUT THERE SUFFERING A BIT UP AT THAT FRONT LINE, SO I THINK IT

1	JEFF SHEEHY. TED LOVE ACTUALLY, SHERRY, HAS ASKED
2	PREVIOUSLY. I SKIPPED OVER HIM. DR. HAWGOOD, DR.
3	FONTANA, DR. LOVE, SHERRY LANSING, AND JEFF SHEEHY.
4	WE HAVE AN ENGAGED BOARD HERE.
5	MS. SAMUELSON: AND JOAN SAMUELSON.
6	CHAIRMAN KLEIN: JOAN, YOU'RE ON THE LIST.
7	WE WILL CALL YOU IN THAT ORDER.
8	DR. HAWGOOD: QUESTION IS ABOUT TIMING,
9	BUT NOT WHEN THE GRANTS GET STARTED, BUT THE
10	DURATION. THREE YEARS SOUNDS AGGRESSIVE TO GET A
11	TRIAL OF THIS COMPLEXITY GOING, AND MORE IMPORTANTLY
12	BECAUSE SAFETY IS GOING TO BE ONE OF THE KEY ISSUES.
13	I HOPE THERE'S A MECHANISM FOR CONTINUED FOLLOW-UP
14	SO THAT WE DON'T FIND SOMETHING FIVE YEARS DOWN THE
15	LINE THAT WE DON'T JUST DECLARE SUCCESS AT THREE
16	YEARS. WE'LL HAVE TO HAVE SOME FUNDING MECHANISM TO
17	ALLOW FOLLOW-UP.
18	DR. TROUNSON: SAM, I HAVE TALKED TO THE
19	PEOPLE THAT ARE IN THIS SPACE. THEY BELIEVE A
20	THREE-YEAR TIME PROGRAM IS APPROPRIATE.
21	DR. HAWGOOD: TO ENROLL PATIENTS, BUT I
22	THINK THERE'S GOING TO BE A NEED TO FOLLOW THEM.
23	DR. TROUNSON: A LOT OF THIS WILL BE IN
24	PHASE I CLEARLY AND THEN PHASE II A. USUALLY THE
25	PHASE II A IS NOT A LARGE NUMBER OF PATIENTS. AND

1	IF YOU GET PHASE I TO BE ACCEPTABLE, THEN YOU
2	GENERALLY, GENERALLY CAN MOVE ON TO PHASE II, AND
3	YOU OBVIOUSLY GET A BIG RESPONSE BY THE PATIENTS IF
4	A PHASE I HAS BEEN SUCCESSFUL.
5	SO I UNDERSTAND THAT IN SOME OF THESE
6	INDICATIONS MAYBE YOU'D WANT TO LOOK OVER A TEN-YEAR
7	TIMEFRAME; BUT, AGAIN, I THINK THE PATIENTS HAVE TO
8	BE PATIENT'S WILL AND THEIR NEED NEEDS TO BE
9	RESPECTED WITHIN THIS. AND, OF COURSE, THE FDA ARE
10	A NATURALLY CAUTIOUS GROUP OF PEOPLE. AND SO WE
11	WILL STAY LINKED WITH THAT, OF COURSE, AND THEY
12	CAN'T MOVE MORE QUICKLY THAN FDA WILL ALLOW.
13	CHAIRMAN KLEIN: WE'RE GOING TO MOVE TO
14	DR. FONTANA. AND REMEMBER THE COMMENT, IF WE ADOPT
15	THIS, DR. HAWGOOD, WITH THE PROVISION GIVING THE
16	PRESIDENT ABILITY TO ADJUST THE TECHNICAL TO FOLLOW
17	OUR SUBSTANTIVE INTENT, THEN HE CAN ADAPT IF WE NEED
18	THREE AND A HALF YEARS OR FOUR YEARS FOR A
19	PARTICULARLY MERITORIOUS AWARD.
20	DR. FONTANA.
21	DR. FONTANA: I'M ALSO AGREEING WITH THE
22	COMMENTS THAT I THINK THIS IS A GREAT PROGRAM AND
23	VERY SUPPORTIVE OF IT. I JUST WANTED SOME
24	CLARIFICATION. HOW ARE YOU GOING TO DEAL WITH THE
25	COMPANIES THAT HAVE THE IND THAT ARE OUTSIDE OF THE
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1	STATE?
2	DR. OLSON: THEY WILL HAVE TO CIRM CAN
3	ONLY FUND RESEARCH CONDUCTED IN CALIFORNIA.
4	DR. FONTANA: THE WORK CAN BE DONE IN THE
5	STATE, IN CALIFORNIA, EVEN THOUGH THE PARENT COMPANY
6	CAN BE OUTSIDE.
7	DR. OLSON: I WILL I WOULD HAVE TO
8	CHECK WITH OUR ATTORNEY ON THAT, BUT I BELIEVE IF
9	THE WORK IS CONDUCTED IN CALIFORNIA AND IF THE
10	COMPANY
11	CHAIRMAN KLEIN: DR. OLSON IS CORRECT. IF
12	THE WORK IS DONE IN CALIFORNIA, THE COMPANY CAN BE
13	FROM OUTSIDE OF CALIFORNIA, AND WORK UNDER MATCHING
14	FUNDS CAN BE DONE OUTSIDE OF CALIFORNIA. IT'S OUR
15	FUNDS THAT HAVE TO BE EXPENDED IN CALIFORNIA.
16	DR. FONTANA: ANOTHER CLARIFICATION. YOU
17	SAID CIRM FUNDING, THE WORK HAD TO BE DONE IN
18	CALIFORNIA; BUT IF THEY HAVE MATCHING FUNDS AND
19	RUNNING TRIALS PERHAPS OUTSIDE THE STATE, WHICH I
20	THINK IS GREAT.
21	DR. OLSON: THAT'S PART OF THE PROGRAM.
22	DR. FONTANA: I THINK IT'S WONDERFUL.
23	CHAIRMAN KLEIN: THANK YOU VERY MUCH. DR.
24	LOVE.
25	DR. LOVE: I WAS JUST GOING TO MAKE THREE
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1	QUICK POINTS. ONE IS I THINK I THOUGHT THROUGH
2	SOME OF THE CONCERNS THAT DR. FRIEDMAN AND, CARMEN,
3	THAT YOU MADE; BUT WHEN I KIND OF SYNTHESIZED IT
4	ALL, I CAME TO THE CONCLUSION THAT I THINK JEANNIE
5	JUST ARTICULATED, WHICH I THINK THIS IS A BRILLIANT
6	PROGRAM PARTICULARLY WHEN YOU THINK ABOUT THE
7	SPOTLIGHT THAT WE HAD THIS MORNING AND THE MISSION
8	HERE. WE DON'T, I THINK, HAVE THE LUXURY OF WAITING
9	FOR TEN PROGRAMS TO GET TO A CERTAIN LEVEL BEFORE WE
10	FUND THE FIRST ONE THAT WE THINK IS MERITORIOUS.
11	AND THE SECOND POINT I WAS GOING TO MAKE
12	IS THAT I THINK THAT IN PARTICIPATING IN THESE
13	PROCESSES BEFORE, THIS GROUP ISN'T GOING TO FUND
14	ANYTHING WHICH ISN'T OF QUALITY. SO IF WE GET ONE
15	APPLICANT AND WE DON'T THINK IT'S QUALITY, WE WON'T
16	FUND IT. I DON'T THINK THAT CONCERN REALLY IS
17	SOMETHING THAT WE HAVE TO WORRY ABOUT.
18	FINALLY, I WAS JUST GOING TO SAY, PAT, I
19	THINK YOU AND YOUR TEAM DID A REALLY ELEGANT JOB OF
20	THINKING IT THROUGH AND LAYING IT OUT AND PRESENTING
21	IT. SO THANK YOU.
22	CHAIRMAN KLEIN: THANK YOU, DR. LOVE.
23	SHERRY AND THEN JEFF AND THEN JOAN.
24	MS. LANSING: IRONICALLY THE TWO L'S, YOU
25	PRETTY MUCH SAID WHAT I WAS GOING TO SAY. SO I WILL

1	BE VERY BRIEF IN CONGRATULATING YOU ON THE WORK AND
2	ALSO SAYING THIS IS WHAT WE ARE ALL SUPPOSED TO BE
3	ABOUT, WHICH IS GETTING TO THE PATIENTS.
4	AND THE REASON THAT I'M NOT THE LEAST BIT
5	NERVOUS ABOUT IT, WHETHER WE HAVE ONE APPLICANT OR
6	THREE APPLICANTS OR 20 APPLICANTS, IS YOU DON'T HAVE
7	TO SPEND THE MONEY. SO I AM ASSUMING THAT IF WE DO
8	NOT HAVE A SINGLE GOOD APPLICANT, YOU WILL COME BACK
9	TO US AND SAY WE'RE GOING TO DO ANOTHER ONE IN SIX
10	MONTHS OR A YEAR, WHATEVER IT IS. I AM NOT ASSUMING
11	YOU ARE GOING TO SPEND THE ENTIRE AMOUNT UNLESS YOU
12	SEE THINGS THAT ARE GREAT. AND WE NEVER HAVE
13	BEFORE, SO I HAVE NO CONCERN ABOUT IT. I THINK IT'S
14	GOOD TO GET THE PROGRAM GOING, AND I WILL NOT
15	CONSIDER IT A FAILURE IF YOU DON'T SPEND THE MONEY,
16	AND I'LL BE HAPPY IF YOU DO BECAUSE THAT MEANS
17	THERE'S GREAT STUFF. SO I LEAVE IT IN YOUR
18	JUDGMENT.
19	MR. SHEEHY: I WANT TO JUST REITERATE
20	THOSE OTHER COUPLE OF POINTS, JUST NOT TO OVERHIT
21	THIS, BUT, YOU KNOW, REALLY LET'S LOOK AT THE KEY
22	CONTROL MECHANISM IN TERMS OF ADVICE THAT WE GET ON
23	GRANTS. THIS GRANTS WORKING GROUP IS A TOUGH-NOSED
24	GROUP, AND THEY ARE NOT SPENDING OUR MONEY ANYWHERE
25	NEAR THE WAY I WOULD SPEND IT. I WOULD BE WRITING

1	CHECKS A LOT MORE. THEY ARE VERY SERIOUS, THEY'RE
2	SOBER, THEY'RE DELIBERATE. AND AS WE SAW IN THE
3	DISEASE TEAMS, THEY WERE VERY CONSERVATIVE IN WHAT
4	THEY RECOMMENDED.
5	I THINK WE HAVE SOME OUTSTANDING PHYSICIAN
6	SCIENTISTS, WE HAVE SOME OUTSTANDING RESEARCHERS,
7	CLINICAL SCIENTISTS. AND I HAVE NOT SEEN ANY
8	EVIDENCE THAT THEY WOULD PUT FORWARD SOMETHING IN A
9	RECKLESS OR NOT IN THE MOST SCIENTIFIC I MEAN THE
10	RIGOR OF OUR REVIEW IS SO HIGH. THE INDEPENDENCE,
11	BECAUSE NONE OF THESE FOLKS CAN COMPETE FOR OUR
12	GRANTS, IS SO HIGH, THAT EVEN IF WE JUST HAD ONE
13	APPLICATION AND WE WERE HELL BENT ON SPENDING THAT
14	MONEY, THERE'S NO WAY WE COULD GET A POSITIVE
15	RECOMMENDATION FROM THEM IF THE SCIENCE WASN'T THERE
16	TO DO SO.
17	CHAIRMAN KLEIN: JOAN. JOAN SAMUELSON,
18	CAN YOU HEAR ME?
19	MS. SAMUELSON: YES, I CAN. CAN YOU HEAR
20	ME?
21	CHAIRMAN KLEIN: I CAN. THANK YOU.
22	MS. SAMUELSON: I HAVE A LOT OF THOUGHTS
23	ABOUT THIS. I'LL JUST PICK ONE. I GUESS IT'S
24	HARD TO DO THIS WITH THAT FEEDBACK, SO I'LL BE
25	BRIEF. I THINK IT'S IMPORTANT THAT WE BE AS
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1	FLEXIBLE AS POSSIBLE AND AS INNOVATIVE IN THE
2	MECHANISM RESEARCH FUNDING MECHANISMS WE CHOOSE.
3	IT WOULD BE GREAT TO JUST FUND ONE IF THAT WAS THE
4	ONE THAT'S GOING TO PUSH THE SCIENCE AHEAD AND PUSH
5	A THERAPY. I'LL QUIT AT THAT. THIS IS HARD TO DO.
6	CHAIRMAN KLEIN: ALL RIGHT. I'D ALSO LIKE
7	TO ASK THAT WE'VE HAD A NUMBER OF ROUNDS EARLY ON TO
8	CREATE AN INFRASTRUCTURE AND A PIPELINE OF EMBRYONIC
9	STEM CELL RESEARCH. WE HAVE A NUMBER OF GRANTS THAT
LO	WERE DEDICATED TO EMBRYONIC STEM CELL RESEARCH.
L1	THEY MAY HAVE HAD PARALLEL STUDIES, PLURIPOTENT
L2	CORD BLOOD STEM CELLS AND EMBRYONIC COMPARING THEM.
L3	AND THESE VARIOUS OUTCOMES FROM THOSE EMBRYONIC STEM
L4	CELL STUDIES MAY LEAD TO A THERAPY THAT IS NOT A
L5	CELLULAR THERAPY, BUT WAS DERIVED FROM AN EMBRYONIC
L6	STEM CELL GRANT. THERE'S A VALUE IN THAT.
L7	I WOULD GUESS THERE'S ALSO A SMALL AMOUNT
L8	OF THOSE THAT ARE AT AN IND LEVEL AS WELL. BUT IN
L9	ORDER TO BROADLY VALIDATE THE SPECTRUM OF HOW
20	EMBRYONIC STEM CELL RESEARCH CAN CONTRIBUTE, CAN WE
21	ALSO INCORPORATE IN THIS SPECIFICALLY AND NARROWLY
22	THERAPIES THAT WERE DERIVED FROM CIRM EMBRYONIC STEM
23	CELL GRANTS THAT MAY BE QUALIFIED FOR AN IND EVEN IF
24	THEY MAY NOT BE A CELLULAR THERAPY?
25	DR. TROUNSON: WELL, I'D ARGUE AGAINST

1	THAT BECAUSE I THINK YOU'D BRING A VERY LARGE NUMBER
2	OF GRANTS FORWARD OR POTENTIALLY. AND I THINK WE
3	WANT TO BE I THINK WE HEARD FROM THE BOARD AT THE
4	LAST MEETING OR THE MEETING BEFORE ABOUT HOW
5	IMPORTANT IT IS TO GET SOME OF THESE PLURIPOTENTIAL
6	STEM CELL THERAPIES THERE. AND I THINK IF WE COLOR
7	IT BY DOING THAT, CHAIR, I THINK WE WILL PROBABLY
8	NOT BE SUCCESSFUL IN MY OWN VIEW.
9	IT SAYS VERY SPECIFICALLY IN THE MISSION,
10	THAT I CONTINUOUSLY NEED TO READ, THIS IS A
11	PLURIPOTENTIAL STEM CELL THERAPY THAT NEEDS TO GET
12	THERE. THE OTHERS, I THINK THEY'RE COMING ALONG
13	BEAUTIFULLY, AND WE SAW THEM IN THE DISEASE TEAMS.
14	I THINK THEY'RE GOING TO GET SWEPT UP IN THE NEW
15	DISEASE TEAMS COMING THROUGH.
16	BUT I WOULD LIKE TO PICK UP THE
17	PLURIPOTENTIAL STEM CELL THERAPEUTICS THAT ARE
18	THERE. THERE IS AT LEAST THREE OF THEM, I THINK,
19	WHO ARE STRUGGLING AT THE MOMENT OUT AT THAT FRONT
20	LEVEL. AND IF IT'S POSSIBLE THAT THEY MEET THE
21	CRITERIA THAT WE DEMAND OF THEM, THEN I THINK WE
22	NEED TO GET IN BESIDE THEM AND GO THROUGH THIS SPACE
23	TOGETHER.
24	CHAIRMAN KLEIN: I HOPE AS WE PUT THIS OUT
25	WE FIND THERE'S SIGNIFICANTLY GREATER, BUT I

1	UNDERSTAND YOUR COMMENTS. DR. FRIEDMAN.
2	DR. FRIEDMAN: JUST VERY QUICKLY. I THANK
3	YOU AND MY FELLOW BOARD MEMBERS. A NUMBER OF THE
4	CONCERNS I HAVE I FEEL ARE BEING ADDRESSED, AND SOME
5	OF MY CONCERNS AND RESERVATIONS, I THINK, HAVE BEEN
6	DEALT WITH.
7	I WOULD LIKE TO TAKE JUST ONE BRIEF
8	SECOND, THOUGH, AND REINFORCE WHAT DR. HAWGOOD SAID
9	EARLIER. I'D LIKE NOT TO HAVE THE DISCUSSION TODAY;
10	BUT WHEN YOU COME BACK WITH THE RFA, I THINK THE
11	QUESTION OF DO WE FOLLOW PATIENTS WHO RECEIVE
12	EMBRYONIC STEM CELL THERAPIES FOR VERY LONG PERIODS
13	OF TIME, EVEN THEIR LIFETIME, I THINK IS A REALLY
14	VALID SCIENTIFIC QUESTION. AND YOUR POINT, IF I
15	UNDERSTOOD IT, WAS SHOULD WE BUILD INTO THAT SOME
16	FINANCES FOR THE LONG TERM. THESE CAN BE PERIODIC,
17	THEY CAN BE BANKING, IT DOESN'T HAVE TO BE A LOT OF
18	MONEY, BUT I FEAR IF WE DON'T BUILD IT IN NOW, IN
19	FACT, WE WON'T DO IT. AND WE HAVE A REALLY
20	SUBSTANTIAL OBLIGATION, NOT FROM FDA NECESSARILY,
21	BUT I THINK TO THE SCIENTIFIC COMMUNITY, AND I ASK
22	YOU PLEASE TO THINK ABOUT THAT AS WE GO FORWARD.
23	DR. TROUNSON: THANK YOU. WE'LL TAKE THAT
24	ON BOARD, MICHAEL. WE'LL TAKE IT IN-HOUSE AND WE'LL
25	HOPEFULLY HAVE A RESPONSE FOR YOU.

1	CHAIRMAN KLEIN: SO LET ME ASK THE MAKER
2	OF THE MOTION TO CLARIFY. WE HAVE DISCUSSED A
3	NUMBER OF TECHNICAL POINTS FROM VARIOUS BOARD
4	MEMBERS TO WHERE THE PRESIDENT WILL NEED DISCRETION
5	TO MODIFY THE TECHNICAL ELEMENTS OF THIS TO BE ABLE
6	TO ADAPT TO THE FACTS OF THE APPLICATIONS TO MAKE
7	SURE SUBSTANTIVELY WE CAPTURE OUR GOAL WITHOUT
8	TECHNICALLY DEFEATING A GOOD APPLICATION.
9	IS IT THE INTENT OF YOUR MOTION TO PROVIDE
10	THE PRESIDENT WITH THAT KIND OF DISCRETION, TO
11	MODIFY THESE VERY SPECIFIC GUIDELINES SO THAT, FOR
12	EXAMPLE, HE COULD HAVE THE PI HAVING 20 PERCENT AND
13	THE CO-PI HAVING 30 PERCENT, BUT ESSENTIALLY
14	ACCOMPLISHING THE INTENT OF THE GUIDELINES WITHOUT
15	TECHNICALLY BEING EXACTLY ALIGNED WITH THIS DETAIL?
16	DR. PRIETO: SURE. THIS IS A CONCEPT
17	PROPOSAL, AND I THINK THE DETAILS WILL COME OUT WHEN
18	THE ACTUAL RFA COMES TO US. AND I BASICALLY FEEL
19	STRONGLY THE WAY JEFF DOES. I THINK THIS IS WHERE
20	WE SHOULD BE MOVING.
21	CHAIRMAN KLEIN: DR. LOVE, IS THAT
22	ACCEPTABLE TO YOU AS THE SECOND?
23	DR. LOVE: I GUESS IT IS. I'M NOT
24	ENTIRELY SURE, THOUGH, WHERE WE'RE GIVING LEEWAY,
25	AND I'M NOT ENTIRELY SURE WHERE LEEWAY IS REQUESTED.
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1	DR. OLSON: I WOULD NOTE THAT IN THE RFA
2	WE TYPICALLY ALLOW TO PETITION THE PRESIDENT FOR
3	PERCENT EFFORT CHANGES, SO THAT IS TYPICALLY
4	INCORPORATED IN EVERY RFA AT THE DISCRETION OF THE
5	PRESIDENT. SO I'M NOT SURE IT REQUIRES A MOTION BY
6	THE BOARD OR INCLUSION IN THE MOTION.
7	CHAIRMAN KLEIN: SO, FOR EXAMPLE, DR.
8	OLSON, IN YOUR COMMENTS YOU SUGGESTED THAT THE TERM
9	COULD BE EXTENDED BY THE PRESIDENT, BUT THAT'S NOT
10	IN THE SUMMARY WE HAVE BEFORE US.
11	DR. OLSON: THAT TYPICALLY IS IN THE RFA.
12	OBVIOUSLY THERE ARE MANY DETAILS IN THE RFA THAT
13	THIS BOARD DOES NOT DEAL WITH. WE COME TO YOU WITH
14	WHAT WE THINK ARE SOME OF THE KEY ASPECTS OF IT, THE
15	SCOPE, THE DOLLARS, YOU KNOW. SO THAT'S WHAT WE DO.
16	MS. SAMUELSON: ARE WE GOING TO BE ABLE TO
17	SEE THE FINAL DRAFT OF THE RFA?
18	CHAIRMAN KLEIN: JOAN, WHAT IS YOUR
19	COMMENT?
20	MS. SAMUELSON: I'M WONDERING IF WE'RE
21	GOING TO BE ABLE TO SEE AND SIGN OFF ON A DRAFT WITH
22	MORE SPECIFICS.
23	CHAIRMAN KLEIN: I'M GOING TO ASK ONE OF
24	THE STAFF MEMBERS, JOAN, TO CALL YOU SO WE CAN GET A
25	CLEAR STATEMENT OF YOUR QUESTION.
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1	MS. SAMUELSON: SURE.
2	MR. HARRISON: I BELIEVE SHE REQUESTED
3	WHETHER THE BOARD WILL HAVE THE OPPORTUNITY TO SIGN
4	OFF ON THE RFA. AND THE ANSWER IS THAT THE BOARD
5	ONLY APPROVES THE CONCEPT. THE DETAILS ARE IN
6	STAFF'S HANDS IN THE DRAFTING OF THE FINAL RFA.
7	MS. SAMUELSON: I GUESS I'M HEARING AN
8	INTEREST BY SEVERAL OF THE BOARD MEMBERS TO HAVE
9	INPUT AT AN LATER STAGE.
10	CHAIRMAN KLEIN: DAVID SERRANO-SEWELL, DO
11	YOU HAVE A COMMENT?
12	MR. SERRANO-SEWELL: HISTORICALLY, AS
13	JAMES HARRISON HAS SAID, WE GIVE CONCEPT APPROVAL TO
14	STAFF. I WASN'T SURE IF THAT PRECLUDED US FROM
15	GIVING FURTHER DIRECTION AND COMMENTS TO STAFF ON
16	THE RFA RFP. PERHAPS IT DOES. I DON'T THINK IT
17	DOES LEGALLY.
18	CHAIRMAN KLEIN: SO OUR PROCESS HAS BEEN
19	TO GIVE CONCEPT APPROVAL. IF A BOARD MEMBER
20	DISCOVERS INFORMATION THEY THINK MIGHT BE HELPFUL TO
21	STAFF, IT CAN BE COMMUNICATED TO STAFF, BUT THE
22	DISCRETION IS AT THE STAFF LEVEL.
23	MR. ROTH: IS THERE A MOTION AND A SECOND?
24	CHAIRMAN KLEIN: DID YOU ACCEPT THE
25	MODIFICATION?

1	DR. LOVE: YES.
2	CHAIRMAN KLEIN: THANK YOU VERY MUCH.
3	MR. ROTH: I'LL CALL THE QUESTION.
4	CHAIRMAN KLEIN: ALL RIGHT. IF I COULD
5	HAVE A ROLL CALL, PLEASE.
6	DR. FRIEDMAN REMINDS ME THAT I HAVE NOT
7	CALLED FOR THE PUBLIC COMMENT, WHICH I'D LIKE TO DO
8	AT THIS TIME.
9	MR. REED: THIS IS ONE OF THE MOST
10	EXCITING DEVELOPMENTS THAT HAS COME ABOUT. I TALKED
11	WITH A PARALYZED PERSON IN A VERY TERRIBLE STRAIT
12	RECENTLY. SHE SAID SHE HAD DECIDED THAT IF THERE
13	WAS NO PROGRESS TOWARD HOPE WITHIN A YEAR THAT SHE
14	WAS GOING TO COMMIT SUICIDE. THIS IS A TREMENDOUS
15	STEP FORWARD. MY GUT INSTINCT IS THAT THIS WILL
16	ADVANCE THE ENTIRE FIELD. CONGRATULATIONS. I HOPE
17	THAT YOU WILL AGREE, AND I THINK THAT YOU WILL.
18	THANK YOU.
19	MS. ROBERSON: HELLO. JUDY ROBERSON WITH
20	HUNTINGTON'S DISEASE. SO I DID HAVE A QUESTION.
21	WHY WAS THIS RFA LIMITED ONLY TO PLURIPOTENT STEM
22	CELLS? OUR CONCERN IS THAT WE HAVE VERY THERE'S
23	VERY LIMITED FUNDING FOR ANY CLINICAL TRIALS. SO
24	THAT'S MY QUESTION.
25	CHAIRMAN KLEIN: THANK YOU. AND, DR.

1	OLSON, COULD YOU PLEASE RESPOND? JUDY, I'D REMIND
2	YOU THAT DISEASE TEAM II WILL BE MUCH BROADER AND
3	WOULD HAVE THE FULL SPECTRUM OF CELLULAR THERAPIES.
4	DR. OLSON HAS TOLD US THAT THAT WILL INCLUDE A
5	PROVISION FOR CLINICAL TRIALS.
6	DR. OLSON: THAT IS CORRECT. SO BOB HAS
7	RESPONDED TO THE QUESTION. MR. CHAIRMAN HAS
8	RESPONDED. THANK YOU.
9	CHAIRMAN KLEIN: MR. HARRISON.
10	MR. HARRISON: I WAS JUST GOING TO MAKE A
11	SUGGESTION. WE DO NOT NEED A ROLL CALL VOTE EXCEPT
12	FOR THOSE MEMBERS WHO ARE ON THE PHONE. SO UNLESS
13	YOU WOULD LIKE TO HAVE ONE, WE CAN JUST
14	CHAIRMAN KLEIN: SO WE WILL CALL THE
15	QUESTION FOR THE MEMBERS PRESENT, AND THEN WE'LL
16	TAKE A ROLL CALL OF THE MEMBERS ON THE PHONE.
17	ALL IN FAVOR.
18	(CHORUS OF AYES.)
19	CHAIRMAN KLEIN: OPPOSED? LET IT BE KNOWN
20	THAT THERE ARE NONE PRESENT WHO ARE OPPOSED. AND
21	PLEASE CALL THE ROLL OF THOSE ON THE PHONE.
22	MS. KING: JOAN SAMUELSON. JON SHESTACK,
23	ARE YOU ON THE LINE?
24	MR. SHESTACK: YES, I AM.
25	MS. KING: AND WHAT IS YOUR VOTE, PLEASE?
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	DARRISTERS REPORTING SERVICE
1	MR. SHESTACK: AYE.
2	MS. KING: JOAN SAMUELSON, ARE YOU STILL
3	ON THE PHONE?
4	CHAIRMAN KLEIN: SO IF YOU WOULD CALL HER
5	PERSONALLY, I'D LIKE TO RECORD WHAT HER VOTE IS.
6	I'M GOING TO KEEP THE ROLL OPEN UNTIL HER VOTE IS
7	RECORDED. MAKE SURE THAT SHE CAN BE ON THE RECORD
8	ACCORDING TO HER WISHES.
9	I'D LIKE TO THANK THE STAFF FOR THEIR
10	TREMENDOUS LEADERSHIP AND EFFORT ON THIS, DR. OLSON
11	AND AN HER TEAM, DR. TROUNSON, THE COUNSEL, ALL OF
12	THE MEMBERS OF THE PRESIDENT'S TEAM.
13	ALL RIGHT. WITH THAT, I'D LIKE TO GO TO
14	THE LEGISLATIVE REPORT. ACTUALLY, IF WE CAN, MAYBE
15	WE COULD TRY AND QUICKLY ADDRESS ITEM THE
16	PRECEDING ITEM FIRST. NOW THAT WE HAVE EVERYONE
17	BACK IN THE ROOM FROM LEGISLATIVE VISITS, ASK IS
18	THERE A MOTION TO APPROVE THE MINUTES?
19	MS. LANSING: SO MOVED.
20	CHAIRMAN KLEIN: SO MOVED BY SHERRY
21	LANSING. IS THERE A SECOND? SECOND BY LEEZA
22	GIBBONS.
23	ALL IN FAVOR.
24	(CHORUS OF AYES.)
25	CHAIRMAN KLEIN: OPPOSED?
	84

1	(NO RESPONSE.)
2	CHAIRMAN KLEIN: OKAY. ANY PUBLIC
3	COMMENTS ON THE MINUTES? I WILL REOPEN THE VOTE IF
4	THERE ARE. I DON'T SEE ANY. THANK YOU. COULD YOU
5	CALL THE ROLL ON THE ONES ON THE PHONES.
6	MS. KING: RELATED TO THE MINUTES, MR.
7	SHESTACK, PLEASE. DO WE STILL HAVE JON SHESTACK
8	WITH US ON THE PHONE?
9	MR. SHESTACK: YES. AYE.
10	MS. KING: THERE'S A MOTION ON THE TABLE
11	TO APPROVE THE MINUTES. YOU SAID AYE.
12	MR. SHESTACK: YES, I APPROVE. I APPROVED
13	THEM. SORRY I DIDN'T SPEAK LOUD ENOUGH.
14	MS. KING: JOAN SAMUELSON, ARE YOU ON THE
15	LINE? WE WOULD JUST LIKE YOUR VOTE IF WE COULD,
16	PLEASE.
17	MS. SAMUELSON: THIS IS JOAN.
18	CHAIRMAN KLEIN: JOAN, GO AHEAD.
19	MS. SAMUELSON: SORRY. I WAS OFF THE LINE
20	WITH JENNA. IS THERE A QUESTION FOR ME?
21	MS. KING: YES. WHAT WE'D LIKE TO KNOW IS
22	WHAT YOUR VOTE IS WITH RESPECT TO THE MOTION ON THE
23	TABLE TO APPROVE THE MINUTES. THERE ARE FOUR SETS
24	OF MINUTES.
25	MS. SAMUELSON: AYE.
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	Diministra in the service
1	CHAIRMAN KLEIN: THANK YOU VERY MUCH.
2	MS. KING: THANK YOU. ACTUALLY JUST TO
3	HAVE IT ON THE RECORD, EVEN THOUGH YOU TOLD ME OVER
4	THE PHONE, COULD YOU PLEASE LET EVERYBODY KNOW WHAT
5	YOUR VOTE WAS WITH RESPECT TO THE CONCEPT APPROVAL
6	FOR CLINICAL TRIALS?
7	MS. SAMUELSON: AYE.
8	MS. KING: THANK YOU.
9	MS. LANSING: I THINK WE'VE ALL READ THE
10	BIOS ON THE GRANTS WORKING GROUP, AND I'D LIKE TO
11	MOVE APPROVAL AND THEN OPEN IT FOR DISCUSSION.
12	DR. PULIAFITO: SECOND.
13	CHAIRMAN KLEIN: THERE'S A MOTION BY
14	SHERRY LANSING, A SECOND BY DR. PULIAFITO. COMMENT
15	FROM THE BOARD? COMMENT FROM THE PUBLIC ON THE
16	WORKING GROUP MEMBERS? I'D LIKE TO CALL THE
17	QUESTION. ALL IN FAVOR.
18	(CHORUS OF AYES.)
19	CHAIRMAN KLEIN: OPPOSED.
20	(NO RESPONSE.)
21	CHAIRMAN KLEIN: CALL THE ROLL, PLEASE, OF
22	THOSE ON THE PHONE.
23	MS. KING: JOAN SAMUELSON, YOUR VOTE
24	PLEASE.
25	MS. SAMUELSON: AYE.
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1	MS. KING: AND JONATHAN SHESTACK, YOUR
2	VOTE PLEASE.
3	CHAIRMAN KLEIN: I'M GOING TO LEAVE THE
4	ROLL OPEN UNTIL WE HEAR FROM JONATHAN SHESTACK.
5	SOME INDICATIONS ARE THAT HE CAN HEAR US, BUT WE
6	CAN'T ALWAYS HEAR HIM.
7	MR. SHESTACK: HELLO.
8	MS. KING: YOUR VOTE WAS AYE; IS THAT
9	CORRECT, MR. SHESTACK?
10	MR. SHESTACK: YES, IT WAS. YES. I'M
11	SORRY.
12	MS. LANSING: (OFF MIC) I JUST WANT TO
13	(INAUDIBLE).
14	CHAIRMAN KLEIN: SHERRY MAKING THAT
15	MOTION. DUANE ROTH IS THE SECOND. AND AS A
16	FRIENDLY AMENDMENT, THERE ARE MEMBERS OF THE BOARD,
17	JEFF SHEEHY, DUANE ROTH, YOURSELF WHO WORKED WITH
18	STUART. I WOULD THINK THAT PERHAPS THAT WE COULD
19	GET TOGETHER AFTER THE MEETING AND ADD SOME REAL
20	STRENGTH TO THIS RESOLUTION. THE INTENT IS THERE,
21	BUT WE HAVE SOME REALLY STRONG STATEMENTS WE CAN
22	MAKE ABOUT HIS LEADERSHIP.
23	MS. LANSING: I ACCEPT THE FRIENDLY
24	AMENDMENT. AND HAVING WORKED WITH HIM, ANYTHING
25	THAT YOU CAN POSSIBLY DO TO MAKE IT STRONGER AND

1	MORE POSITIVE AND MORE FILLED WITH GRATITUDE, I
2	WOULD SUPPORT.
3	MR. ROTH: IT'S ACCEPTED.
4	CHAIRMAN KLEIN: IT'S ACCEPTED BY THE
5	MAKER AND THE SECOND. MY UNDERSTANDING IS NO PUBLIC
6	COMMENT, INCLUDING MY MOTION MY REQUEST FOR
7	AMENDMENT. I'M GOING TO CALL FOR THE QUESTION. ALL
8	IN FAVOR.
9	(CHORUS OF AYES.)
10	CHAIRMAN KLEIN: OPPOSED?
11	(NO RESPONSE.)
12	CHAIRMAN KLEIN: AND ON THE PHONE.
13	MR. SHESTACK: AYE.
14	MS. KING: JON SHESTACK'S VOTE IS AYE.
15	MS. SAMUELSON: AYE.
16	MS. KING: AND JOAN SAMUELSON'S VOTE IS
17	AYE.
18	CHAIRMAN KLEIN: WE HAVE A VERY IMPORTANT
19	ITEM HERE, ITEM 7, THEN WE'RE GOING TO THE
20	LEGISLATIVE ITEM. CAN DR. TROUNSON INDICATE WHO
21	WILL MAKE THE PRESENTATION?
22	LET ME ASK THE BOARD FOR A MINUTE. DOES
23	THE BOARD WANT TO TAKE A THREE- OR FOUR-MINUTE
24	RECESS? KEEP GOING. ALL RIGHT.
25	DR. TROUNSON: DR. PATRICIA OLSON WILL
	88

1	PRESENT THIS ON BEHALF OF STAFF.
2	DR. OLSON: MR. CHAIRMAN, MEMBERS OF THE
3	BOARD, AND MEMBERS OF THE AUDIENCE, I STAND BEFORE
4	YOU AGAIN. SO WHAT I WANT TO TALK ABOUT NOW IS
5	AGENDA ITEM NO. 7 IN YOUR BINDER. AND I WANTED TO
6	REMIND YOU WHAT THIS ITEM IS ABOUT. IT'S A PROPOSED
7	ACTION TO APPROVE ADDITIONAL A FUNDING INCREASE
8	FOR THE EARLY TRANSLATIONAL RESEARCH AWARD TR1-01267
9	ENTITLED "DEVELOPMENT CANDIDATES FOR CELL-BASED
10	THERAPIES FOR PARKINSON'S DISEASE."
11	AND WHAT I WANT TO DO IS GIVE YOU A LITTLE
12	BIT OF BACKGROUND TO THIS BEFORE I MOVE ON. FIRST,
13	THIS APPLICATION WAS SUBMITTED IN RESPONSE TO OUR
14	FIRST EARLY TRANSLATIONAL RFA, WHICH WAS ESSENTIALLY
15	AN IMPORTANT PART OF OUR PIPELINE DEVELOPMENT TO
16	IDENTIFY DEVELOPMENT CANDIDATES AND BOTTLENECKS TO
17	CELL THERAPIES. SO THAT WAS THE SCOPE OF THIS RFA.
18	THIS PARTICULAR APPLICATION RECEIVED A
19	STRONG AND ENTHUSIASTIC RECOMMENDATION FROM THE
20	GRANTS WORKING GROUP. AND IN RESPONSE TO THAT
21	RECOMMENDATION AND YOUR ASSESSMENT OF THE VALUE OF
22	THE RESEARCH AND ITS POTENTIAL AND THE POTENTIAL OF
23	ITS BENEFIT FOR PATIENTS WITH PARKINSON'S DISEASE,
24	YOU APPROVED THE AWARD FOR FUNDING.
25	THE GOAL OF THIS AWARD IS, IN FACT, TO

SELECT AND DEVELOP THE BEST CANDIDATE CELL FOR
POTENTIAL THERAPY OF PARKINSON'S DISEASE. SO LET ME
PROVIDE A BIT MORE DETAIL HERE.
WHAT THE AWARD PROPOSES IS TO ESSENTIALLY
TAKE FULLY CHARACTERIZED AND TO TEST IN VIVO AND IN
VITRO NEURAL STEM CELLS DERIVED FROM SIX DIFFERENT
SOURCES. YOU MAY ALL REMEMBER, AND I BELIEVE IT
WAS, I MAY GET MY DATES WRONG, BUT IN THE LATE '80S
AND '90S, THERE WERE TRIALS CONDUCTED OF CELL
THERAPIES WHERE CELLS WERE IMPLANTED INTO THE BRAINS
OF PATIENTS WITH PARKINSON'S DISEASE. AND AT LEAST
INITIAL CLINICAL RESULTS WERE VERY DRAMATIC IN SOME
SMALL NUMBER OF PATIENTS; BUT WHEN SUBSEQUENT
CONTROLLED TRIALS WERE DONE, IT DIDN'T MEET THE
PRIMARY END POINT, ALTHOUGH, AGAIN, THERE WERE SOME
EXAMPLES OF PATIENTS THAT WERE SUCCESSFULLY TREATED
AND ESSENTIALLY RESPONDED TO THE THERAPY.
THERE WAS SOME THOUGHT THAT AT THAT TIME
THAT THE CELL POPULATIONS THAT WERE USED WERE NOT
RIGOROUSLY WHAT DO I WANT TO SAY? CONSISTENT
AND CHARACTERIZED. EVEN NOW THERE'S TALK AT THE NIH
OF POSSIBLY FUNDING ANOTHER TRIAL WITH, SAY,
FETAL-DERIVED CELLS. SO IN SOME SENSES I WOULDN'T
GO SO FAR AS TO SAY THERE'S CLINICAL PROOF OF
CONCEPT, BUT THERE'S TANTALIZING EVIDENCE THAT, IN
90

1	FACT, CELL REPLACEMENT FOR PARKINSON'S DISEASE IS
2	SOMETHING WORTH CONSIDERING AND WORTH PURSUING.
3	SO WHAT THIS APPLICATION SPECIFICALLY
4	PROPOSES TO DO IS TO GET NEURAL STEM CELLS FROM SIX
5	DIFFERENT SOURCES AND TO VERY FULLY CHARACTERIZE
6	THEM AND TEST THEM IN VIVO AND IN VITRO. AND THE IN
7	VIVO TESTING WOULD TAKE PLACE IN WHAT IS, I THINK,
8	REGARDED IN THE RESEARCH COMMUNITY AS THE BEST MODEL
9	OF PARKINSON'S DISEASE, THE MOST ANALOGOUS TO THE
10	HUMAN DISEASE THAT ACTUALLY EXISTS.
11	SO THAT'S WHAT THIS PROPOSAL WAS TO DO,
12	AND THE MODEL BEST RECAPITULATES THE HUMAN COURSE OF
13	DISEASE AND IS GENERALLY RECOGNIZED AS BEING TRUE.
14	THE STUDIES ON THIS MODEL WERE ALL
15	BUDGETED IN A SUBCONTRACT FOR SUPPLIES, SERVICES,
16	AND RESEARCH OUTSIDE OF CALIFORNIA. SO THAT
17	SUBCONTRACT FOR THE STUDIES IN THIS MODEL, IT'S AN
18	EXTERNAL TO CALIFORNIA CONTRACT, IT INCLUDED
19	SUPPLIES, SERVICES, AND RESEARCH ACTIVITIES. THE
20	SUBCONTRACT WAS JUSTIFIED IN THE BUDGET SECTION OF
21	THE APPLICATION. THE REVIEWERS WERE AWARE OF IT.
22	THEY DID READ IT.
23	AS IS CIRM'S POLICY AND OUR STANDARD
24	PRACTICE, DURING PREFUNDING ADMINISTRATIVE REVIEW,
25	THAT IS, BEFORE WE ISSUE A NOTICE OF AWARD, CIRM
	0.1

1	REVIEWS THE PROPOSAL, INCLUDING THE BUDGET, FOR
2	ALLOWABLE EXPENSES. WE REVIEWED THE PROPOSED
3	SUBCONTRACT. AS YOU KNOW, CIRM HAS A POLICY AND THE
4	BOARD AND, I BELIEVE, THE PROPOSITION 71 HAS A
5	POLICY THAT HAS A PREFERENCE FOR PURVEYORS IN
6	CALIFORNIA OF SUPPLIES AND SERVICES. IT IS A
7	PREFERENCE. AND GENERALLY WE TRY AND DO THAT ALL
8	ALONG.
9	CIRM DETERMINED, GIVEN THE ABSOLUTE UNIQUE
10	NATURE OF THE SUPPLIES AND SERVICES PROVIDED IN THIS
11	SUBCONTRACT AND THEIR INABILITY TO BE DUPLICATED
12	ELSEWHERE, THAT IT WOULD ALLOW THE COSTS ASSOCIATED
13	WITH SUPPLIES AND SERVICES, BUT WOULD NOT ALLOW THE
14	COST ASSOCIATED WITH THE EXTRA OUTSIDE OF CALIFORNIA
15	RESEARCH ACTIVITIES.
16	SO
17	CHAIRMAN KLEIN: SO, DR. OLSON, BECAUSE
18	WORDS ARE VERY IMPORTANT HERE, LET ME EMPHASIZE A
19	COUPLE OF THEMES WITH SOME CLEAN LINES HERE. MY
20	UNDERSTANDING IS ALL THE RESEARCH WILL BE IN
21	CALIFORNIA. THE DISEASE MODEL IS WHAT WE'RE TALKING
22	ABOUT, ANIMAL DISEASE MODEL AS BEING A UNIQUE
23	RESOURCE WOULD BE OUTSIDE OF CALIFORNIA. IT JUST
24	CAN'T BE REPLICATED IN CALIFORNIA TO GET THE KIND OF
25	BEST POTENTIAL RESULTS.

1	SO THIS IS A SITUATION WHERE, AS YOU SAY,
2	WE HAVE A PREFERENCE FOR VENDORS IN THE STATE. BUT
3	THE RESEARCH ON THIS IS WITHIN CALIFORNIA. THAT'S
4	THE RESEARCH WE'RE FUNDING, WHICH IS A VERY
5	IMPORTANT DISTINCTION IN WHAT WE FUND OUT OF THE
6	BOND FUNDS THAT ARE RAISED IN CALIFORNIA. BUT WHEN
7	WE NEED TO GET AN ANIMAL MODEL OR SPECIAL EQUIPMENT
8	OR SPECIAL SERVICES THAT ARE CRITICAL TO RESEARCH,
9	WE CAN SOURCE THAT OUT OF STATE.
10	IS THAT A CORRECT CHARACTERIZATION, MR.
11	HARRISON?
12	MR. HARRISON: YES.
13	DR. OLSON: SO FOR THAT PART OF THE
14	CONTRACT THAT INCLUDED RESEARCH, CIRM WENT TO ASK
15	THE PI TO PROPOSE ALTERNATIVES THAT WOULD ALLOW
16	ESSENTIALLY THE RESEARCH TO BE CONDUCTED WITHIN
17	CALIFORNIA IN ACCORDANCE WITH THE GOALS OF THE
18	PROPOSAL.
19	AND SO WHAT THE PI DID WAS MADE A PROPOSAL
20	TO MOVE THOSE RESEARCH ACTIVITIES THAT WERE PART OF
21	THE SUBCONTRACT IN-HOUSE. SO SOME OF THE
22	CHARACTERIZATION STUDIES WERE TO BE MOVED IN-HOUSE
23	TO THE GRANTEE INSTITUTION. AND THE IMPACT ON
24	THE THERE WAS A DRAFT BUDGET SUBMITTED FOR THE
25	COST OF MOVING THOSE RESOURCES IN-HOUSE, AND THE
	0.3

1	IMPACT IS OBVIOUSLY ONE OF COST.
2	CHAIRMAN KLEIN: DR. OLSON, COULD YOU
3	COMMENT? IS THIS AN AWARD WITH A BILATERAL FUNDING
4	PARTNER?
5	DR. OLSON: THIS IS AN AWARD THAT DOES
6	INCLUDE AN AUSTRALIAN FUNDING PARTNER, BUT THE
7	RESEARCH THAT WAS TO BE CONDUCTED BY THE AUSTRALIAN
8	FUNDING PARTNER IS NOT AFFECTED BY THIS. THAT
9	RESEARCH STILL WILL GO FORWARD. I WOULD POINT OUT
10	THE AUSTRALIAN FUNDING PARTNER HAS BEEN ON HOLD
11	WHILE WE WORK THROUGH THE ISSUES ASSOCIATED WITH IT.
12	CHAIRMAN KLEIN: RIGHT. SO FOR
13	CLARIFICATION, CALIFORNIA FUNDS DO NOT FUND ANY PART
14	OF THE AUSTRALIAN FUNDING PARTNER. THAT IS ALL
15	FUNDED BY AUSTRALIA.
16	DR. OLSON: FUNDED BY OUR COLLABORATIVE
17	FUNDING PARTNER. YOU MAY RECALL THIS WAS ACTUALLY
18	THE FIRST RFA WHERE WE HAD THE COLLABORATIVE
19	FUNDING PARTNER PROGRAM WAS PUT INTO EFFECT. AND
20	ACTUALLY THIS AWARD WAS SUCCESSFUL AND INCLUDED A
21	COLLABORATIVE FUNDING PARTNER. SO THAT IS A CORRECT
22	STATEMENT.
23	SO WHAT WE DID IN THE ASSESSMENT OF THE
24	PROPOSED CHANGES TO ESSENTIALLY CONDUCT THE
25	ACTIVITIES THAT WERE TO HAVE BEEN TO CONDUCT ALL
	0.4

1	THE RESEARCH ACTIVITIES IN CALIFORNIA, AS WE
2	CONDUCTED AN INTERNAL ASSESSMENT. WE RETAINED AN
3	EXTERNAL CONSULTANT TO LOOK OVER THE PROPOSED
4	CHANGES, AND WE CONDUCTED A SITE VISIT AT THE
5	INSTITUTION.
6	AND AS A RESULT OF ALL THOSE ACTIVITIES,
7	WE BECAME CONVINCED THAT AT LEAST THE RESEARCH COULD
8	MOVE AHEAD AS PROPOSED ALTHOUGH IT WOULD BE AT AN
9	ADDED COST. I'D LIKE TO GO INTO THOSE CHANGES HERE.
10	SO IF YOU LOOK AT THIS SLIDE, BASICALLY
11	THERE ARE DIRECT PROJECT COSTS AND IN THE SO
12	THEY'RE INCREASED ROUGHLY, WHAT, 900,000, I GUESS,
13	IN YEAR ONE FOR THE NOT IN YEAR ONE, ACROSS THE
14	BUDGET FOR THE DIRECT COSTS. THIS IS MAINLY DUE TO
15	AN INCREASE IN FTE'S AND THE ASSOCIATED COST OF
16	THOSE FTE'S IN CALIFORNIA. AND LET ME EXPLAIN WHY
17	THAT IS.
18	THE PERSONNEL WHO WERE GOING TO CONDUCT
19	THIS RESEARCH EXTERNAL TO CALIFORNIA AS PART OF THIS
20	SUBCONTRACT ARE PERSONS WHO HAVE BEEN DOING THESE
21	KINDS OF STUDIES FOR OVER 20 YEARS. YOU ASK TO
22	TRANSFER THAT KIND OF EXPERTISE AND EXPERIENCE TO
23	ESSENTIALLY PEOPLE WHO ARE NOT TOTALLY FAMILIAR WITH
24	THAT, AND IT BASICALLY TAKES SOME TIME AND MONEY.
25	SO WHAT WE'RE DOING IS WE'RE REPLACING ROUGHLY

1	\$400,000 IN 20 YEARS OF EXPERIENCE WITH RESEARCH
2	COSTS WITH THESE INTERNAL PEOPLE.
3	NOW, WE WILL BE HAVING THE HEAD OF THE
4	GROUP WHO CONDUCTED THIS BEFORE WILL BE VISITING THE
5	SITE PERIODICALLY TO ASSESS. THE CONSULTANT ALSO
6	SUGGESTED INCLUDING MILESTONES ON THE PERFORMANCE OF
7	THESE COMPLEX ASSAYS, AND THAT WE WILL DO. SO WE
8	WILL MEASURE AND MAKE SURE THAT THE PROPOSED STAFF
9	IS ABLE TO TAKE ON THESE.
10	I DON'T WANT YOU TO THINK THAT THESE
11	PEOPLE AREN'T VERY GOOD. I MEAN THESE ARE PEOPLE
12	THESE ARE GENERALLY POST DOCS IN NEUROBIOLOGY WHO
13	HAVE EXPERIENCE IN THINGS, BUT NOT IN PARTICULAR IN
14	THE DETAILED ASSAYS AND STUDIES THAT WERE
15	CONTEMPLATED. SO THAT IS PART OF IT.
16	ALSO, SOME OF THE EQUIPMENT THAT OBVIOUSLY
17	WOULD BE RESIDENT AT THE OTHER PLACE, BUT THAT'S A
18	SMALL PART. THAT'S ABOUT \$207,000, AND THERE'S SOME
19	VECTOR CORE CHARGES FOR SOME HISTOLOGY SERVICES AS
20	WELL TO HELP WITH SOME OF VECTORS FOR THE THIRD AIM.
21	SO THAT'S THE MAIN DRIVER. THOSE ARE THE
22	MAIN DRIVERS OF THE INCREASE IN DIRECT PROJECT COSTS
23	OVER THE COURSE OF THE AWARDS.
24	AS YOU KNOW, CIRM ALSO HAS COSTS CALLED
25	DIRECT FACILITIES COSTS, WHICH ARE ESSENTIALLY
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1	CALCULATED ON RESEARCH THAT'S DONE AT THE
2	INSTITUTION. OBVIOUSLY CIRM AND THE ICOC DOES NOT
3	WANT TO PAY DIRECT FACILITIES COSTS ON RESEARCH THAT
4	ARE CONDUCTED AT A NEIGHBORING INSTITUTION, AT
5	ANOTHER INSTITUTION WHETHER IT BE INSIDE CALIFORNIA
6	OR NOT. SO DIRECT COSTS ARE ALWAYS ADJUSTED FOR
7	COSTS THAT DO NOT OCCUR AT THE INSTITUTION. WHEN
8	YOU MOVE A LOT OF THE COSTS THAT WERE FORMERLY GOING
9	TO BE CONDUCTED OUTSIDE OF THE INSTITUTION INTO THE
10	INSTITUTION, YOU HAVE A BIGGER BASE FOR YOUR
11	CALCULATION OF DIRECT FACILITIES COST.
12	AND SO THAT'S WHY AND THEN THE INDIRECT
13	COST IS CALCULATED ON THE SUM OF DIRECT PROJECT
14	COSTS AND DIRECT FACILITIES COSTS, AND THAT'S JUST
15	FIXED BY THE RFA. THE DIRECT FACILITIES RATE IS A
16	NEGOTIATED RATE THAT EACH INSTITUTION HAS WITH THE
17	NIH THAT CIRM REVIEWS FOR THAT PORTION OF IT THAT'S
18	ALLOWABLE. SO IT IS WE DO THIS EVERY YEAR. WE
19	GO THROUGH WITH THE INSTITUTION WHAT THEIR CURRENT
20	DIRECT NEGOTIATED FACILITIES RATE IS WITH THE NIH,
21	AND THAT IS WHAT WE USE.
22	CHAIRMAN KLEIN: DR. OLSON, I THINK YOU'VE
23	DONE A TREMENDOUS JOB. IT DEMONSTRATES THE
24	DISCIPLINE OF OUR GRANT ADMINISTRATION POLICY THAT
25	ESSENTIALLY IDENTIFIED THIS ISSUE AND WORKED THROUGH

1	THE PROBLEMS TO MAKE SURE WE BROUGHT IT INTO
2	COMPLETE COMPLIANCE WITH CALIFORNIA AND CALIFORNIA
3	REGULATIONS FOR PROPOSITION 71.
4	THE TOTAL INCREASED COSTS, I UNDERSTAND,
5	ARE 1,853,179 AS SHOWN ON YOUR SUMMARY; IS THAT
6	CORRECT?
7	DR. OLSON: THAT IS CORRECT.
8	CHAIRMAN KLEIN: SO THAT'S UP TO. THAT'S
9	VERY IMPORTANT.
10	DR. OLSON: THAT'S AN IMPORTANT POINT.
11	CHAIRMAN KLEIN: BECAUSE WE DO
12	ADMINISTRATIVELY HAVE ACUTELY FOCUSED OVERSIGHT
13	DURING THE COURSE OF THE RESEARCH.
14	I'D LIKE TO SEE IS THERE A MOTION TO
15	APPROVE?
16	MR. SHEEHY: SO MOVED.
17	DR. LOVE: SECOND.
18	CHAIRMAN KLEIN: SO MOVED BY JEFF SHEEHY,
19	SECOND BY DR. LOVE. IS THERE ADDITIONAL COMMENT BY
20	THE MEMBERS?
21	MS. SAMUELSON: YES, I HAVE COMMENT.
22	CHAIRMAN KLEIN: SO, JOAN, I'M GOING TO
23	LET YOU LEAD ON THESE JOAN, I'M GOING TO HAVE YOU
24	LEAD ON THESE COMMENTS, THEN I'M GOING TO GO TO
25	MICHAEL GOLDBERG, AND THEN I'M GOING TO GO TO DR.
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1	POMEROY, AND THEN I'M GOING TO GO TO THE UPPER TIER
2	AND THOSE COMMENTS.
3	NOTICE THE LEAD IS ON THE SPEARHEAD OF THE
4	ORGANIZATION THAT'S ON THE FRONT OF THIS
5	ORGANIZATION.
6	MS. SAMUELSON: THIS IS JOAN. IS THIS
7	DOABLE WITH THIS FEEDBACK? WHAT DO YOU THINK, BOB?
8	SHOULD I TRY THIS?
9	CHAIRMAN KLEIN: ABSOLUTELY TRY IT.
10	JOAN, MELISSA KING HAS SUGGESTED THAT IF I
11	GO AND START WITH MR. GOLDBERG, GO TO DR. POMEROY,
12	THAT MELISSA KING WILL TALK TO YOU, GET YOUR
13	COMMENTS, AND RELAY THEM. SHE'S GOING TO RELAY THEM
14	IN REAL-TIME. SO SHE'S GOING TO CONNECT WITH YOU
15	RIGHT NOW, GO OVER THEM, AND THEN IN REAL-TIME GO
16	THROUGH YOUR COMMENTS, SO WE CAN GET A CLEAR
17	UNDERSTANDING. MR. GOLDBERG AND THEN DR. POMEROY.
18	MR. GOLDBERG: COULD YOU PLEASE REMIND US,
19	FOR THE EARLY TRANSLATIONAL RESEARCH AWARDS, WHAT
20	THE UNUSED, IF THERE WAS UNUSED, FUNDING IN
21	CONNECTION WITH THAT GRANT COHORT?
22	DR. OLSON: ACTUALLY THE EARLY
23	TRANSLATIONAL RESEARCH AWARD, THIS BOARD AWARDED \$72
24	MILLION IN AWARDS, AND THE ORIGINAL ALLOCATION HAD
25	BEEN 60 MILLION, BUT THE BOARD WAS SO IMPRESSED BY
	00

1	THE QUALITY OF THE AWARDS OF THE APPLICATIONS
2	THAT CAME FORTH AT THAT TIME, THAT THEY INCREASED
3	THE ALLOCATION.
4	MR. GOLDBERG: COULD YOU REMIND US OF THE
5	PRIORITY SCORE FOR THIS SPECIFIC GRANT?
6	DR. OLSON: THIS WAS A TIER I APPLICATION.
7	IT HAD A 79, ACTUALLY. AND I THINK, AS IT WAS
8	INDICATED IN THE SUMMARY, THERE WAS A MOTION TO MOVE
9	IT EVEN HIGHER IN THE TIER, BUT THAT DID FAIL, BUT
10	THIS WAS A TIER I AWARD AS RECOMMENDED BY THE GRANTS
11	WORKING GROUP.
12	MR. GOLDBERG: THANK YOU.
13	CHAIRMAN KLEIN: THANK YOU. DR. POMEROY.
14	DR. POMEROY: SO I SUPPORTED FUNDING THIS
15	WHEN WE FUNDED IT, AND I DON'T THINK THAT THE ISSUES
16	ON THE TABLE ARE REALLY A REREVIEW OF THE IMPORTANCE
17	OF THIS GRANT. IT'S A VERY IMPORTANT GRANT.
18	MY COMMENTS ARE ABOUT THE PROCESS, AND
19	THAT'S WHERE I DO HAVE SOME CONCERN. AND IF A
20	PROPOSAL CAME IN THAT VIOLATED CIRM POLICIES, I
21	PRESUME THAT WE WOULD REVIEW THAT AND REJECT IT.
22	SAY THIS HAD BEEN TO DO THE WHOLE THING AT YALE.
23	THAT NEVER WOULD HAVE PROCEEDED THROUGH THIS
24	PROCESS.
25	SO THE FACT THAT WE DIDN'T CATCH THIS
	100

1	INITIALLY CONCERNS ME. AND THE REASON THAT THAT
2	CONCERNS ME IS BECAUSE THE GRANT REVIEWERS
3	PRESUMABLY PRESUMED THAT THESE SENIOR INVESTIGATORS
4	WOULD BE DOING THIS RESEARCH. AND PART OF THEIR
5	SCORE WAS RELATED TO THE FACT THE EXPERTISE OF THOSE
6	PEOPLE. AND I'M SURE THESE POST DOCS THAT YOU REFER
7	TO ARE VERY TALENTED PEOPLE, BUT THE GRANT SCORE MAY
8	HAVE BEEN DIFFERENT IF THEY HAD BEEN THE ONES
9	PROPOSED TO DO THIS.
10	THE OTHER COMMENT IS JUST A COMMENT ABOUT
11	HOW AN INSTITUTION RESPONDS WHEN THESE KIND OF
12	PROBLEMS ARISE. AND IN SOME CASES I THINK THAT
13	INSTITUTIONS WOULD WAIVE THEIR ADDITIONAL INDIRECT
14	COSTS TO ACCOMMODATE THE FACT THAT THIS CHANGE WAS
15	REQUIRED.
16	THOSE ARE MY COMMENTS ABOUT THE PROCESS
17	AND NOT ABOUT THE IMPORTANCE OF THIS GRANT.
18	CHAIRMAN KLEIN: THANK YOU. AND SO DR.
19	LEVIN AND THEN WE'VE GOT JEFF SHEEHY.
20	DR. TROUNSON: I WONDER IF I CAN JUST
21	RESPOND.
22	CHAIRMAN KLEIN: ABSOLUTELY. DR.
23	TROUNSON.
24	DR. TROUNSON: THAT'S WHY WE HAD A SENIOR
25	PERSON FROM THE AREA REVIEW THE CHANGES AND WENT

101

1	THROUGH THOSE IN SOME DETAIL. AND I FELT THAT IT
2	WAS ALSO IMPORTANT FOR SO THAT'S WHY WE HAD AN
3	INDEPENDENT REVIEWER FROM THE PARKINSON'S AREA. AND
4	WE ALSO, IN ADDITION, DECIDED A SITE VISIT TO REALLY
5	LOOK AT THESE PEOPLE AND LOOK AT THE WHOLE PROGRAM
6	WAS WARRANTED.
7	AND THE LEAD PERSON FROM YALE IS ATTENDING
8	THE INSTITUTION ON A REGULAR BASIS, AND WE WERE
9	PRETTY CONVINCED REALLY BY HIS STRONG ARGUMENT THAT
10	THIS PROJECT WAS A FULL MERIT STILL. SO ALONG WITH
11	THE REVIEWER'S COMMENTS, WE FELT THAT IT REALLY
12	HADN'T DEPARTED DRAMATICALLY FROM THE PROJECT THAT
13	WE SAW IN THE FIRST INSTANCE.
14	CHAIRMAN KLEIN: SO DR. OLSON AND THEN I'M
15	GOING TO GO TO DR. LEVIN AND JEFF SHEEHY AND THEN
16	OVER TO SHERRY LANSING.
17	DR. OLSON: I WOULD LIKE TO RESPOND TO
18	CLAIRE'S FIRST COMMENT, WHICH I DO APPRECIATE. AND
19	I WANT TO RESPOND AS FOLLOWS: WHEN STAFF RECEIVES
20	APPLICATIONS, IN POINT OF FACT, WE DO DO A CHECK.
21	WE CHECK FOR PI ELIGIBILITY. WE CHECK FOR CO-PI
22	ELIGIBILITY. WE CHECK FOR INSTITUTIONAL
23	ELIGIBILITY. AND IDEALLY IN A WORLD OF UNLIMITED
24	RESOURCES AND MORE STAFF, WE WOULD CHECK FOR ALL
25	THESE PARAMETERS. WE DID NOT SEE THIS. I'M NOT
	102

1	SURE WE WOULD HAVE DISALLOWED IT. I DON'T KNOW THAT
2	WE WOULD HAVE. A LOT OF TIMES WE PUT THINGS THROUGH
3	TO THE WORKING GROUP. THEY THEN WE LET THEM
4	KNOW, AND THEY WERE AWARE. THIS WAS JUSTIFIED IN
5	THE BUDGET JUSTIFICATION.
6	AND WHEN THEY RAISED CONCERNS, SO THEY'VE
7	RAISED CONCERNS BEFORE, THEY'VE SAID, FOR AN
8	EXAMPLE, THIS PERSON'S SALARY SEEMS TO BE OVER THE
9	CAP. AND WE TELL THEM THAT WE WILL DEAL WITH THAT
10	IN PREFUNDING ADMINISTRATIVE REVIEW. SO THAT OUR
11	PROCESS IS IN THE PREFUNDING ADMINISTRATIVE REVIEW
12	TO CATCH SOME OF THESE THINGS. BUT AS I SAY,
13	IDEALLY IN THE BEST POSSIBLE WORLD, WE WOULD TRY
14	WE WOULD READ ALL THE APPLICATIONS, WE WOULD CATCH
15	ALL OF THESE THINGS BEFORE WE MOVE FORWARD. BUT TO
16	HAVE A TURNAROUND TIME OF EIGHT WEEKS OR LESS FROM
17	THE TIME OF RECEIPT OF APPLICATIONS TILL A REVIEW
18	IMPOSES SOME CHALLENGES ON US.
19	CHAIRMAN KLEIN: I THINK THAT WE LEARN
20	CONSTANTLY, AND WE'VE TAKEN THE LESSONS, DR.
21	POMEROY, AND REALLY ENHANCED OUR PRECLEARANCE
22	CHECKLIST AS WELL.
23	ELONA BAUM, DID YOU HAVE A COMMENT?
24	MR. TORRES: WE HAVE 20 MINUTES BEFORE
25	WE'RE GOING TO LOSE SOME MEMBERS TO LEGISLATIVE
	102

1	VISITS.
2	MS. BAUM: IT'S VERY CRITICAL THAT I JUST
3	PUT THIS ON THE RECORD. I JUST WANT TO CLARIFY.
4	DR. OLSON SAID THAT IF SHE HAD KNOWN THAT THERE WAS
5	SOME OUT-OF-STATE FUNDING, THAT SHE WOULDN'T
6	NECESSARILY NOT ALLOW IT. I THINK WHAT SHE WAS
7	SAYING WAS NOT THAT THE POSITION IS IS THAT IT IS
8	ACCEPTABLE FOR US TO FUND RESEARCH OUTSIDE OF THE
9	STATE. SHE WOULD HAVE LET IT GONE FORWARD TO THE
10	GRANTS WORKING GROUP AND LET THEM KNOW THAT THIS WAS
11	AN ISSUE, AND IT WOULD BE A PLACE SO THAT THEY COULD
12	MAKE THE DECISION BASED ON THAT. I DIDN'T WANT ANY
13	OTHER I DIDN'T WANT ANYTHING ELSE DRAWN FROM THAT
14	STATEMENT.
15	CHAIRMAN KLEIN: SO I'D LIKE TO CALL ON
16	DR. LEVIN.
17	DR. LEVIN: THANKS. I'D LIKE TO, I GUESS,
18	SHARE CLAIRE'S CONCERNS. I'M TORN ON THIS GRANT.
19	IT'S CLEARLY A WONDERFUL PROJECT THAT HAS A LOT OF
20	POTENTIAL. IT'S A GREAT GROUP OF INSTITUTIONS THAT
21	COULD POTENTIALLY MAKE A REAL DIFFERENCE IN
22	ATTACKING PARKINSON'S. AND I'M ALSO AWARE OF THE
23	LARGE AMOUNT OF DILIGENCE THAT THE CIRM STAFF HAS
24	DONE IN DOING THE SITE VISITS AND MAKING SURE THAT
25	THIS PROJECT IS REASONABLY ASSURED OF SUCCESS HAD IT

104

1	GONE IN THIS NEW FORM.
2	HOWEVER, I AM UNCOMFORTABLE WITH THE
3	PROCESS BECAUSE WE HAVE A VERY STRICT PROCESS THAT
4	WE MAKE ALL THE OTHER GRANT APPLICANTS ADHERE TO AND
5	THAT, I BELIEVE, IN MANY SITUATIONS GRANTS HAVE NOT
6	BEEN APPROVED BECAUSE THEY DON'T CONFORM TO THE GAP.
7	GRANTS WILL HAVE BEEN PULLED BACK WHEN THEY'RE NOT
8	MEETING THEIR MILESTONES IF THINGS LIKE THIS ARE
9	CAPABLE OF HAPPENING. EVERY OTHER APPLICANT TAKES
10	GREAT CARE TO ADHERE TO ALL OF OUR POLICIES. IT
11	SEEMS TO ME THAT THIS PROPOSAL DID NOT. AND WE'RE
12	NOT TALKING OF A SMALL CHANGE LIKE, OH, WE NEED A
13	CALIFORNIA VENDOR VERSUS. THIS IS MORE THAN
14	50-PERCENT INCREASE IN THE GRANT FUNDING LEVEL.
15	YOU'RE REPLACING, AS YOU STATED, THE SENIOR
16	EXPERIENCED INVESTIGATORS WITH INEXPERIENCED
17	INVESTIGATORS, WHICH IT'S NOT CLEAR WHY THAT WOULD
18	BE THREE TIMES THE PRICE SINCE THEY ARE USUALLY
19	CHEAPER, BUT IT RAISES SOME CONCERNS AS TO FOLLOWING
20	PROCESS.
21	IF WE ALLOW THIS TO GO FORWARD, THEN CAN
22	EVERYBODY COME BACK AND SAY, WELL, PROPOSE ONE THING
23	AND THEN CHANGE IT LATER AND WE'RE OPENING OURSELVES
24	UP TO A LOT OF LIABILITY IN THIS REGARD. AND
25	ESPECIALLY BECAUSE THE DIFFERENCE IN FUNDING LEVEL

1	IS ENOUGH FOR AN ENTIRE OTHER GRANT.
2	SO I THINK WE NEED TO CONSIDER CAREFULLY
3	WHETHER WE'RE OKAY WITH THIS PROCESS REGARDLESS OF
4	WHETHER THE GRANT ITSELF IS GOING TO BE ABLE TO
5	ACHIEVE WHAT IT WANTED TO DO.
6	CHAIRMAN KLEIN: DR. TROUNSON, IS IT MY
7	UNDERSTANDING THAT THE PI FROM YALE HAS, IN FACT,
8	COMMITTED HIMSELF TO PARTICIPATING IN THIS AT
9	BURNHAM IN TERMS OF ADVISING THEM? IS THAT A
10	CORRECT STATEMENT?
11	DR. TROUNSON: THAT'S CORRECT. THAT IS
12	ABSOLUTELY CORRECT. DR. REDMAN, WHO IS THE KEY AT
13	YALE, IS A TERRIFIC SCIENTIST. AND HE WAS THERE AT
14	THE ON-SITE MEETING, AND HE GAVE ABSOLUTE SUPPORT.
15	IN FACT, THERE ARE A SENIOR MEMBER OF HIS TEAM IS
16	ACTUALLY MOVING TO THE BURNHAM. SO ONE OF THOSE
17	PERSONS WHO WOULD HAVE BEEN DOING THIS AND KEY IN
18	THE PROJECT WILL ACTUALLY BE MOVING THERE.
19	SO I ACTUALLY FEEL THAT THIS PROJECT IS
20	COMPOSED IN A WAY THAT WE WOULD RANK IT IN THAT AREA
21	IF WE SAW IT AGAIN AS IT IS NOW. AND I BELIEVE THAT
22	THERE'S NO REAL REASON TO PUT A SUBSTANTIAL DELAY IN
23	TURNING IT BACK THROUGH. IT WILL HAVE TO BE QUITE A
24	DISTANCE NOW FOR IT TO COME UP AGAIN IN ANOTHER
25	TRANSLATIONAL PROGRAM. IT WILL BE MORE THAN 12
	100

1	MONTHS AWAY BEFORE THEY CAN APPLY AGAIN.
2	CHAIRMAN KLEIN: THANK YOU. IS JOAN
3	READY, AND THEN WE'RE GOING TO GO TO JEFF.
4	MS. SAMUELSON: SURE. ALTHOUGH I HAVE TO
5	SAY, BOB, I'M WONDERING IF WE'RE NOW UP AGAINST
6	CHAIRMAN KLEIN: JOAN, CAN YOU HEAR US
7	NOW? HOW IS YOUR TRANSMISSION AT THIS POINT? NOT
8	GOOD. JEFF SHEEHY AND THEN WE HAVE SHERRY LANSING
9	AND THEN DAVID SERRANO-SEWELL.
10	MR. SHEEHY: I'M HEARING A LOT HERE ABOUT
11	PROCESS. AND, YOU KNOW, LET'S JUST BE CLEAR. THIS
12	IS INCREDIBLY IMPORTANT SCIENCE. AND WHEN YOU LOOK
13	AT THE TRANSLATION DISEASE TEAM SPACE, THIS IS
14	REALLY THE KEY PARKINSON'S GRANT. THERE'S NO
15	PARKINSON'S GRANT IN THE DISEASE TEAM SPACE.
16	LET'S THINK ABOUT WHAT THE SCIENCE IS HERE
17	AND WHAT WE'RE TALKING ABOUT. THE RESOURCE THAT WE
18	ARE HAVING TROUBLE ACCESSING THAT IS THE SOURCE OF
19	THE PROBLEM IS A UNIQUE RESOURCE. WE TALKED ABOUT
20	THIS AT THE STANDARDS WORKING GROUP. WE TALKED
21	ABOUT THIS MANY TIMES, THAT THERE'S NO GOOD DISEASE
22	MODELS FOR PARKINSON'S. AND THIS PARTICULAR ANIMAL
23	MODEL THAT WE'RE HAVING TO RESOURCE OUTSIDE OF
24	CALIFORNIA IS THE ABSOLUTE BEST ANIMAL MODEL FOR
25	PARKINSON'S. IT'S STATE OF THE ART.
	107

1	THE GOAL OF THIS RFA IS TO SEE WHICH
2	CELLS, WHETHER EMBRYONIC, IPS, MESENCHYMAL, THEY
3	HAVE A WHOLE BASKET OF CELLS THAT THEY'RE GOING TO
4	TEST IN THIS ANIMAL MODEL TO SEE WHICH IS GOING TO
5	BE MOST EFFECTIVE AT PRODUCING DOPAMINERGIC NEURONS
6	TO CURE OR POTENTIALLY CURE PARKINSON'S. THIS IS A
7	CRITICAL PART OF OUR MISSION. THIS IS A CRITICAL
8	PART OF MOVING FORWARD IN THE FIGHT AGAINST
9	PARKINSON'S.
10	AND WE CAN GET INTO THE WEEDS ON PROCESS,
11	BUT WE'RE A NEW AGENCY. AND THIS WAS OUR FIRST
12	EARLY TRANSLATION ROUND. YOU GUYS ARE AMAZING.
13	IN A WAY WE'RE HAVING TO DISCOVER THINGS AS WE GO
14	ALONG. SO IF WE SIT HERE AND BOG OURSELVES DOWN ON
15	PROCESS, WHO ARE WE REALLY HELPING? I HAVE ABSOLUTE
16	CONFIDENCE IN THE DISCRETION OF THE PRESIDENT, WHICH
17	WE HAVE WE'VE BEEN EMPHATIC ALL THE ALONG IN
18	GIVING THE PRESIDENT DISCRETION WHEN THERE ARE
19	PROBLEMS WITH GRANTS TO RESOLVE THEM.
20	WE HAD ANOTHER GRANT, THE JACKSON LABS
21	GRANT, IN THE SAME ROUND THAT WE GAVE ENORMOUS
22	AMOUNT OF DISCRETION TO THE PRESIDENT AND TO STAFF
23	TO MAKE THAT WORK ACCORDING TO ISSUES RAISED BY THE
24	REVIEWERS. I DON'T THINK THAT THE ISSUE OF HAVING
25	TO ACCESS AND MANAGE THIS ANIMAL RESOURCE IS ANY WAY
	100

1	NEGATIVELY IMPACTED BY THIS SHIFT. THE KEY SCIENCE
2	IS BEING DONE AT THE BURNHAM, WHICH IS THE
3	INSTITUTE.
4	IT WAS A HIGH SCORING GRANT. IT'S VERY
5	INNOVATIVE. IT'S KEY TO MOVING FORWARD. I DON'T
6	SEE HOW WE CAN TELL PEOPLE IN THE PARKINSON'S
7	COMMUNITY, BECAUSE WE WERE HAVING TO MANAGE OUR
8	PROCESS, BECAUSE WE HAVE A RELATIVELY SMALL STAFF
9	WORKING, YOU KNOW, 9,000 MILES AN HOUR, WE'RE GOING
10	TO BE DOING CLINICAL TRIALS, THAT SOMEHOW WE
11	COULDN'T PUT ALL THE PIECES TOGETHER TO REALLY GET
12	THIS TO WORK. NOW THAT WE'VE FIGURED IT OUT, WE'RE
13	GOING FOR IT. AND THE IDEA THAT SOMEHOW SOME OTHER
14	SCIENTIST WAS PENALIZED BY NOT HAVING THEIR GRANT,
15	AS WAS REPORTED ON THE BLOG, THAT SOME OTHER
16	SCIENTIST DIDN'T GET THEIR GRANT. AS PER MICHAEL
17	GOLDBERG'S QUESTION, WE WENT OUTSIDE THE RANGE. WE
18	CAN ALWAYS GO OUTSIDE THE RANGE. WE COULD HAVE
19	APPROVED ANY NUMBER OF ADDITIONAL GRANTS, SO IT
20	WASN'T LIKE THIS DISPLACED ANOTHER GRANT.
21	WE WERE COMMITTED TO THE SCIENCE. WE WERE
22	COMMITTED TO MAKING A DIFFERENCE IN PARKINSON'S
23	DISEASE. I DON'T SEE HOW YOU KNOW, THAT THIS
24	PRESENTS ANY PROBLEM. I ALSO NOTE THAT THIS WAS A
25	\$6 MILLION POTENTIAL ROUND PER AWARD, SO THEY'RE
	109
	107

1	WELL THEY'RE STILL BELOW AND WE HAD A LOT OF
2	PEOPLE GO ALL THE WAY TO SIX MILLION IN THIS ROUND.
3	CHAIRMAN KLEIN: SO, JEFF, THANK YOU. AND
4	JUST FOR THE RECORD, I WANT TO REMIND EVERYONE WHO'S
5	LISTENING THAT JEFF HAS A RECORD OF BEING COMPLETELY
6	COMMITTED TO PROCESS. I THINK WHAT I UNDERSTAND YOU
7	TO SAY IS THAT SINCE THE PROCESS, IN FACT, INCLUDES
8	THE GRANTS ADMINISTRATION PROGRAM THAT IS INTENDED
9	TO CATCH AND DEAL WITH ISSUES LIKE THIS, THAT IS
10	EXACTLY WHAT IT DID AND IT BROUGHT IT COMPLETELY
11	INTO COMPLIANCE.
12	THE FACT THAT WE CAN IMPROVE IS VERY
13	IMPORTANT, AND WE ARE ALWAYS COMMITTED TO IMPROVING
14	AND FOLLOWING MORE DETAILED CHECKLISTS. AS WE GAIN
15	STAFF, WE'RE ABLE TO DRILL DEEPER DOWN INTO THIS.
16	THE ISSUE HERE IS THAT THOSE PROCESS ISSUES HAVE
17	FROM THE PRESIDENT'S VIEWPOINT BEEN ADDRESSED.
18	BUT, SHERRY, IF YOU WOULD
19	DR. POMEROY: MAY I RESPOND?
20	CHAIRMAN KLEIN: DR. POMEROY AND THEN
21	WE'RE GOING TO HAVE JOAN. DR. POMEROY.
22	DR. POMEROY: I WANT TO REASSURE JEFF THAT
23	MY COMMENT WAS NOT MEANT TO SUGGEST THAT WE SHOULD
24	PULL THIS GRANT IN ANY WAY. MY COMMENT WAS MEANT TO
25	SUGGEST THAT THE FACT THAT IT COST \$1.8 MILLION MORE
	110

1	TO DO THIS AT BURNHAM THAN IT DID AT YALE SUGGESTS
2	TO ME THAT WE SHOULD CONSIDER THE INSTITUTION
3	SHARING SOME OF THE FINANCIAL HIT THAT IS ASSOCIATED
4	WITH THIS CHANGE.
5	MS. KING: MS. SAMUELSON'S COMMENTS.
6	CHAIRMAN KLEIN: YES. JOAN SAMUELSON,
7	PLEASE.
8	MS. KING: CAN YOU HEAR ME? WE CAN HEAR
9	YOU, SO WHY DON'T YOU TRY AND MAKE THEM YOURSELF AND
10	I'M HERE AS A BACKUP.
11	MS. SAMUELSON: I ENTHUSIASTICALLY SUPPORT
12	THE GRANT PROPOSAL. ONE WAY OR ANOTHER I THINK THIS
13	NEEDS TO BE FUNDED. CAN YOU UNDERSTAND ME?
14	CHAIRMAN KLEIN: SO, JOAN, WE'RE GOING TO
15	HAVE MELISSA REPEAT YOUR STATEMENTS IN REAL-TIME.
16	MS. KING: CORRECT ME IF I'M WRONG, BUT
17	THIS IS WHAT I UNDERSTOOD YOU TO TELL ME BEFORE.
18	YOU ENTHUSIASTICALLY SUPPORT THIS GRANT; HOWEVER,
19	YOU FEEL THAT THERE ARE SOME HIGHLY IMPORTANT ISSUES
20	BEING RAISED IN THIS CONVERSATION. AND YOU DON'T
21	WANT THOSE TO BE LOST AND YOU DON'T WANT THE
22	DISCUSSION ON THOSE TO END WITH THIS VOTE.
23	THEREFORE, YOU'D LIKE TO ACTUALLY MAKE A
24	MOTION TO APPROVE THIS GRANT AS PRESENTED BY DR.
25	OLSON WITH THE UNDERSTANDING THAT THE BOARD, AS PART

1	OF THAT MOTION, DIRECTING STAFF TO WORK WITH THE
2	BOARD TO CONTINUE THE DISCUSSION OF THE NUMEROUS
3	ISSUES THAT WERE RAISED IN THE DISCUSSION.
4	MS. SAMUELSON: THAT'S CORRECT.
5	CHAIRMAN KLEIN: ALL RIGHT. IS THERE A
6	SECOND TO THAT MOTION?
7	DR. PRIETO: SECOND.
8	CHAIRMAN KLEIN: SECOND FROM DR. PRIETO.
9	WE ALREADY HAVE A SEPARATE MOTION PENDING. AND SO
10	LET ME ASK WHO MADE THE ORIGINAL MOTION?
11	JEFF, WOULD YOU ACCEPT THAT AMENDMENT FROM
12	JOAN? HER AMENDMENT WAS THAT THE DISCUSSION OF
13	THESE ISSUES THAT HAVE BEEN RAISED NOT STOP WITH
14	THIS VOTE, BUT THE STAFF WILL WORK WITH THE BOARD TO
15	CONTINUE TO TRY AND ACHIEVE THE INTENT OF THE
16	COMMENTS THAT HAVE BEEN MADE.
17	DR. TROUNSON: I DON'T THINK IT'S GOING TO
18	CHANGE ANYTHING. TO BE HONEST, WE'VE GOT THE BEST
19	DEAL THAT IS POSSIBLE.
20	CHAIRMAN KLEIN: I DON'T THINK THEY'RE
21	ASKING THAT YOU THEY'RE TALKING ABOUT ADDRESSING
22	PROCESS, NOT CHANGING THIS GRANT FURTHER, DR.
23	TROUNSON.
24	DR. TROUNSON: I THINK LET ME JUST SAY
25	WITH THE QUANTUM OF MONEY THAT'S NECESSARY TO
	112

1	UNDERTAKE THE PROJECT, WITHOUT THAT QUANTUM OF
2	MONEY, THEY CAN'T DO IT.
3	CHAIRMAN KLEIN: OKAY. DR. TROUNSON, HER
4	MOTION WAS TO APPROVE THIS, BUT HAVE THE BOARD
5	MEMBERS WORK WITH THE STAFF TO TRY AND ADDRESS
6	PROCESS ISSUES.
7	THE MAKERS OF THE MOTION AND THE SECOND
8	HAVE ACCEPTED THE MODIFICATION. SHERRY LANSING, YOU
9	HAVE THE FLOOR.
10	MS. LANSING: I ALWAYS BELIEVE WE SHOULD
11	DO WHAT'S IN THE BEST INTEREST OF THE SCIENCE AND OF
12	THE PATIENTS. SO I HAVE A REALLY NAIVE QUESTION TO
13	ASK. CAN YOU EXPLAIN TO ME WHY IT CAN'T BE
14	RESUBMITTED AND THEN GONE THROUGH AND HOW LONG THAT
15	PROCESS WOULD TAKE AND HOW THAT WOULD HARM US?
16	DR. TROUNSON: WELL, WE HAVE AN EARLY
17	TRANSLATIONAL PROGRAM WHICH THEY WOULD MISS OUT ON.
18	MS. LANSING: WHY? BECAUSE IT'S A WEEK
19	FROM NOW. WHY COULDN'T THEY JUST PUT THIS IN RIGHT
20	NOW?
21	DR. TROUNSON: WELL, I HAVEN'T ASKED THEM
22	TO DO THAT. I DON'T KNOW IF THEY WOULD ACTUALLY
23	MEET THOSE DEADLINES. I THINK THAT'S POSSIBLY
24	UNLIKELY THAT THEY WOULD DO IT. ANYWAY, THAT WILL
25	PUT THEM OFF. THERE WILL BE ANOTHER SEVEN MONTHS
	112

1	BEFORE IT WAS APPROVED. SO THEN THEY'RE LOOKING AT
2	ABOUT TEN MONTHS BEFORE THEY GO AGAIN. IF THEY
3	ACTUALLY MISS THIS DEADLINE, AND I'D HAVE TO TAKE
4	LEGAL ADVICE ON WHAT THEY COULD PUT IN BECAUSE IT
5	COULDN'T BE THE ORIGINAL ONE. IT'D HAVE TO BE THE
6	REVAMPED
7	MS. LANSING: WHY COULDN'T IT BE? BECAUSE
8	THAT'S AGAINST OUR
9	DR. TROUNSON: BECAUSE THE ORIGINAL ONE
10	HAS GOT THE YALE.
11	MS. LANSING: THIS NEW ONE THAT YOU HAVE,
12	IF YOU PUT IT IN IF IT'S DONE, WHY CAN'T THEY
13	JUST PUT IT IN?
14	DR. TROUNSON: I THINK IT WOULD BE AT
15	LEAST SEVEN MONTHS BEFORE IT WAS APPROVED, TEN
16	MONTHS BEFORE IT WAS UNDER WAY. I THINK THAT'S A
17	SIGNIFICANT LOSS IN A PROJECT WHICH I THINK IS FOR
18	PRIME TIME ALREADY. IT'S THERE. IT'S NOT GOING TO
19	CHANGE BECAUSE OF THIS. ALL WE'RE SAYING IS THAT
20	THEY INAPPROPRIATELY PUT SOME RESEARCH IN AT THE
21	YALE UNIVERSITY. THEY SHOULD HAVE READ THAT. OKAY.
22	WE PICKED IT UP AND WE'VE REFORMATTED IT TO SAY,
23	OKAY, YOU PUT THAT RESEARCH COMPONENT BACK IN THE
24	BURNHAM, AND I'LL MAKE A RECOMMENDATION, WHICH I'M
25	MAKING THROUGH PAT OLSON, TO YOU TO FUND IT NOW.

1	I BELIEVE THE PROJECT IS AS GOOD AS WHAT
2	IT WAS WHEN IT WAS IN FRONT OF THE GRANTS WORKING
3	GROUP. I DON'T BELIEVE THERE'S ANY MERIT IN
4	DELAYING THE PROJECT. I DON'T THINK THE PROJECT
5	WILL CHANGE WITH ANY DELAY. I THINK WE'VE UNDERGONE
6	ALL THE PROCESSES THAT WERE BUILT INTO THE AGENCY,
7	AND WE PICKED UP THE ERROR. ARGUABLY IT MIGHT HAVE
8	BEEN SEEN BY THE INSTITUTION WHEN THEY PUT IT IN.
9	WE MIGHT HAVE PICKED IT UP A LITTLE EARLIER IN THE
10	PROCESS. YOU COULD ARGUE THAT WE NEED TO BE A BIT
11	MORE VIGILANT.
12	MS. LANSING: WHAT DO YOU THINK THE
13	CHANCES ARE OF BURNHAM PICKING UP THE OTHER COSTS
14	THAT THIS IS COSTING?
15	DR. TROUNSON: NONE. I THINK IT'S ZERO
16	CHANCE THAT THEY WILL PICK IT UP. WE HAD THOSE
17	DISCUSSIONS WITH THE BURNHAM INSTITUTE. AND THIS
18	WAS WE'VE CUT THEM THEY HAD PUT MORE INTO THIS
19	THAN IS IN FRONT OF YOU, AND WE CUT THEM BACK AND
20	SAID THAT WAS INAPPROPRIATE. WE WANTED TO CUT IT
21	DOWN TO THE ABSOLUTE MINIMUM TO MAKE THIS PROJECT
22	WORK AT THE SAME LEVEL AS IT WAS WHEN IT WAS
23	MS. LANSING: ONE LAST QUESTION. THE
24	ONLY THE THING THAT BOTHERS ME, AND, AGAIN, I
25	NEVER WANT THE PROCESS TO INTERFERE WITH THE
	115

1	SCIENCE, BUT THE THING THAT BOTHERS ME, SINCE I AM A
2	PROCESS ORIENTED PERSON, IS WERE THERE OTHER THINGS
3	THAT PEOPLE DIDN'T APPLY BECAUSE THEY WERE
4	OUT-OF-STATE? ARE WE MAKING AN EXCEPTION THAT WE
5	COULD HAVE MADE FOR OTHER GRANTS AS WELL, ONLY THIS
6	CAME?
7	DR. TROUNSON: IT'S UNUSUAL THAT A MODEL
8	LIKE THIS IS OUT OF THE STATE. AND THE PEOPLE WHO
9	DEVISED AND CREATED THIS MODEL WERE FROM YALE, SO
10	THEY HAVE A BIG BECAUSE THEY DEVELOPED IT OVER 25
11	YEARS, THEY HAVE REALLY BIG INPUT INTO IT. SO
12	CHAIRMAN KLEIN: DR. TROUNSON, WE'RE ABOUT
13	TO LOSE OUR QUORUM. AND SO WE'VE HAD A VERY VIBRANT
14	DISCUSSION HERE.
15	MS. LANSING: WOULD IT HAVE BEEN RATED
16	DIFFERENTLY WITH LESSER PI'S?
17	DR. TROUNSON: OUR FEELING, AND INCLUDING
18	THAT OF THE INDEPENDENT ASSESSOR, WAS IT WOULD BE
19	RANKED THE SAME.
20	CHAIRMAN KLEIN: MY UNDERSTANDING, SHERRY,
21	IS THAT THE PI FROM YALE HAS COMMITTED HIMSELF TO
22	BEING ON-SITE AT BURNHAM TO PARTICIPATE.
23	SO I NEED TO CALL THIS QUESTION. AND THEN
24	WE'RE GOING TO HAVE A ROLL CALL ON THE AUDIO
25	PARTICIPATION.
	116

	DANKISTERS REPORTING SERVICE
1	MS. KING: WE RECOMMEND THAT WE DO A FULL
2	ROLL CALL FOR THIS ITEM.
3	CHAIRMAN KLEIN: FINE. WE'RE FOLLOWING
4	THAT RECOMMENDATION. THOSE MEMBERS WITH CONFLICTS
5	WILL NOT BE CALLED. IF WE WILL START THE ROLL CALL,
6	PLEASE, AFTER PUBLIC COMMENT. SEEING NO PUBLIC
7	COMMENT, IF WE COULD COMMENCE THE ROLL CALL, PLEASE.
8	MS. KING: DONALD DAFOE FOR RICARDO AZZIZ.
9	DR. DAFOE: AYE.
10	MS. KING: GORDON GILL FOR DAVID BRENNER.
11	DR. GILL: AYE.
12	MS. KING: KIM WITMER FOR WILLIAM BRODY.
13	DR. WITMER: AYE.
14	MS. KING: JACOB LEVIN FOR SUSAN BRYANT.
15	DR. LEVIN: NO.
16	MS. KING: MICHAEL FRIEDMAN.
17	DR. FRIEDMAN: YES.
18	MS. KING: LEEZA GIBBONS.
19	MS. GIBBONS: YES.
20	MS. KING: MICHAEL GOLDBERG.
21	MR. GOLDBERG: YES.
22	MS. KING: SAM HAWGOOD.
23	DR. HAWGOOD: YES.
24	MS. KING: BOB KLEIN.
25	CHAIRMAN KLEIN: YES.
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1		MS. KING: SHERRY LANSING.
2		MS. LANSING: I'M SO CONFUSED.
3		MS. KING: I WILL COME BACK TO YOU, MS.
4	LANSING.	TED LOVE.
5		DR. LOVE: YES.
6		MS. KING: CLAIRE POMEROY.
7		DR. POMEROY: YES.
8		MS. KING: FRANCISCO PRIETO.
9		DR. PRIETO: (NO AUDIBLE RESPONSE.)
10		MS. KING: CARMEN PULIAFITO.
11		DR. PULIAFITO: YES.
12		MS. KING: ROBERT QUINT.
13		DR. QUINT: YES.
14		MS. KING: DUANE ROTH.
15		MR. ROTH: YES.
16		MS. KING: JOAN SAMUELSON.
17		MS. SAMUELSON: YES.
18		MS. KING: DAVID SERRANO-SEWELL.
19		MR. SERRANO-SEWELL: YES.
20		MS. KING: JEFF SHEEHY.
21		MR. SHEEHY: YES.
22		MS. KING: JONATHAN SHESTACK.
23		MR. SHESTACK: YES.
24		MS. KING: OSWALD STEWARD.
25		CHAIRMAN KLEIN: IF YOU THINK YOU ARE
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1	ABSTAINED, PLEASE.
2	MS. KING: ART TORRES.
3	MR. TORRES: AYE.
4	MS. KING: AND SHERRY LANSING.
5	MS. LANSING: YOU DON'T NEED MY VOTE, SO
6	I'M ABSTAINING.
7	CHAIRMAN KLEIN: SHE'S ABSTAINING.
8	MS. LANSING: I'M SO CONFUSED.
9	CHAIRMAN KLEIN: THE MEMBER IS ABSTAINING.
10	AND DUANE ROTH HAS A COMMENT.
11	MR. ROTH: I DIDN'T GET INVOLVED IN THE
12	DISCUSSION, BUT I WOULD LIKE TO ASK THAT WE REALLY
13	GO BACK AND LOOK CAREFULLY AT WHAT HAPPENED HERE
14	BECAUSE MY RECOLLECTION IS QUITE DIFFERENT IN HOW
15	THIS WAS PRESENTED. AND I'D LIKE YOU TO JUST COME
16	BACK AND MAYBE AT THE NEXT MEETING YOU CAN UPDATE
17	US. MY RECOLLECTION IS THAT THE TWO OUTSIDE
18	RESOURCES WERE TIED AS ONE, AND THAT'S WHY AND
19	THEN THE PIECE THAT WAS EVENTUALLY LOOKED AT SAID,
20	WELL, THIS MAY NOT PERFECTLY FIT OUR REQUIREMENTS,
21	BUT I DON'T THINK THERE WAS AN INTENTION TO SLIP
22	RESEARCH INTO THIS PROPOSAL. IT WAS THAT THE TWO
23	ORGANIZATIONS, ONE DIRECTLY TIED TO THE OTHER, WERE
24	LOOKED AT AS AN EXTERNAL CONTRACT ALMOST. AND
25	THAT'S WHY THE CONFUSION. IT WASN'T THAT WE MISSED

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1	SOMETHING. IT WAS WHETHER, IN FACT, THAT PORTION
2	DR. TROUNSON: THAT'S CORRECT. IT WAS
3	IT DID CONTAIN A SERVICE CONTRACT THAT COULD BE
4	SEPARATE.
5	CHAIRMAN KLEIN: I THINK WHAT DUANE ROTH
6	IS SAYING IS IT WAS DIFFICULT TO ANALYZE HOW MUCH
7	WAS A SERVICE CONTRACT AND WHAT WAS RESEARCH, AND IT
8	WAS TIED TO THE ANIMAL MODEL. SO IT MADE IT VERY
9	COMPLEX TO SURGICALLY SEPARATE IT.
10	WHAT I'D LIKE TO DO HERE IS WE HAVE VERY
11	IMPORTANT MR. HARRISON WOULD LIKE TO MAKE A
12	STATEMENT. ART TORRES NEEDS TO GIVE US A BRIEFING
13	HERE, AND THEN WE NEED TO ADJOURN TO AN EXECUTIVE
14	SESSION. WE HAVE PEOPLE THAT NEED TO LEAVE TO GO TO
15	CERTAIN MEETINGS. MR. HARRISON.
16	MR. HARRISON: FOR THE RECORD, THAT MOTION
17	CARRIED WITH 19 YES VOTES.
18	MS. LANSING: MY CONFUSION, AND THAT'S THE
19	ONLY WORD I WOULD USE, SO VOTE CONFUSED, WHATEVER
20	YOU WANT TO SAY, WAS REALLY JUST ABOUT HOW THIS
21	HAPPENED. AND I LISTENED AND I REALLY WELCOME WHAT
22	DUANE IS SAYING. THE SCIENCE SOUNDS EXTRAORDINARY
23	AND I'M REALLY HAPPY THAT IT PASSED, BUT I JUST
24	DON'T UNDERSTAND IT. I WOULD REALLY APPRECIATE
25	THAT. YOU DON'T HAVE TO DO IT FOR THE FULL BOARD.
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1	MAYBE YOU COULD JUST DO IT FOR ME.
2	CHAIRMAN KLEIN: AND WE APPRECIATE THE
3	I KNOW ALL OF US APPRECIATE THE ROBUST PARTICIPATION
4	OF ALL THE OTHER MEMBERS IN THIS PROCESS.
5	ART, YOU HAVE THE FLOOR. WE'RE GOING TO
6	LOOK AT THE LEGISLATIVE ITEM ON THE AGENDA, WHICH IS
7	ITEM 10.
8	MR. TORRES: THANK YOU, MR. CHAIRMAN AND
9	MEMBERS. IF YOU WOULD LOOK AT THE ITEM, WHICH IS
10	SENATE BILL 1064 BY SENATOR ALQUIST, I WOULD LIKE TO
11	HAVE MR. HARRISON GO OVER VERY QUICKLY BECAUSE I
12	THINK MOST OF THE MEMBERS KNOW WHAT'S IN THE BILL.
13	I THINK JUST A GENERAL OVERVIEW, MR. HARRISON, WOULD
14	BE MORE THAN APPROPRIATE.
15	MR. HARRISON: GOOD AFTERNOON, EVERYONE.
16	SENATE BILL 1064, AS VICE CHAIR TORRES SAID, DOES A
17	NUMBER OF THINGS. SO LET ME JUST BRIEFLY SUMMARIZE
18	THEM.
19	FOUR OF THE PROPOSALS THAT ARE MADE WITHIN
20	SB 1064 WERE ITEMS THAT CIRM ALREADY HAS UNDERTAKEN.
21	SO, FOR EXAMPLE, SB 1064 WOULD REQUIRE THE AGENCY TO
22	POST TALLIES WITH SUMMARIES OF THE VOTES AND
23	RECUSALS FOR ALL BOARD MEETINGS. SINCE THE VERY
24	FIRST MEETING OF THIS AGENCY, ALL OF THE MEETINGS
25	HAVE BEEN TRANSCRIBED AND THEN POSTED ON THE WEB

1	SITE IMMEDIATELY UPON BEING AVAILABLE. AND GOING
2	BACK TO JANUARY 1, 2008, WE HAVE INCLUDED AS AN
3	ATTACHMENT TO THE MINUTES A SUMMARY OF THE VOTE
4	TALLIES AND RECUSALS.
5	LIKEWISE, 1064 WOULD REQUIRE US TO ENGAGE
6	IN SUCCESSION PLANNING. THE EVALUATION
7	SUBCOMMITTEE, WHICH IS SCHEDULED TO MEET ON MARCH
8	19TH, HAS ON ITS AGENDA, AMONG OTHER ITEMS, A
9	DISCUSSION OF SUCCESSION PLANNING.
LO	1064 WOULD ALSO REQUIRE THAT ANY REVENUE,
L1	ANY I.T. REVENUE, GENERATED FROM CIRM-FUNDED
L2	RESEARCH WOULD BE DEPOSITED INTO THE GENERAL FUND OF
L3	THE STATE OF CALIFORNIA. CIRM REGULATIONS ALREADY
L4	REQUIRE THIS.
L5	LIKEWISE, 1064 WOULD REQUIRE THE AGENCY TO
L6	ENGAGE IN TRANSITION PLANNING RELATING TO THE
L7	EXPIRATION OF BOND FUNDING THAT PRESIDENT TROUNSON
L8	MENTIONED EARLIER; AND AS MENTIONED IN THE PAST, WE
L9	HAVE BEEN ENGAGED IN THAT PROCESS FOR SOME TIME,
20	INCLUDING THE LOAN PROGRAM, THE DISCUSSION OF
21	FEDERAL LOAN GUARANTEES, AND OTHER OPTIONS FOR
22	EXTENDING CIRM'S FUNDING.
23	THERE ARE ADDITIONAL AREAS ADDRESSED IN
24	1064 WHICH I WILL JUST BRIEFLY NOTE. 1064 WOULD
25	REDUCE THE TERMS OF THE CHAIR AND VICE CHAIR FROM

1	SIX YEARS TO FOUR YEARS AND REQUIRE THAT THEY BE
2	STAGGERED, BUT IT PROVIDES NO MECHANISM FOR GETTING
3	THEM TO THE POINT WHERE THEY'RE STAGGERED.
4	CURRENTLY THE CHAIR AND VICE CHAIR SERVE CONSECUTIVE
5	TERMS.
6	LIKEWISE, IT WOULD EXTEND THE JURISDICTION
7	OF THE CITIZENS FINANCIAL ACCOUNTABILITY OVERSIGHT
8	COMMITTEE TO INCLUDE A REQUIREMENT THAT THE
9	CONTROLLER ANNUALLY COMMISSION AN AUDIT, A
10	PERFORMANCE AUDIT, OF CIRM THAT EXAMINES ALL OF THE
11	AGENCY'S POLICIES, PRACTICES, AND PROCEDURES TO
12	DETERMINE WHETHER THEY'RE CONSISTENT WITH EXISTING
13	LAW AND WHETHER THEY COMPLIED. AS YOU ALL KNOW, THE
14	AGENCY HAS ALREADY BEEN SUBJECT TO SEVERAL AUDITS,
15	INCLUDING FROM THE BUREAU OF STATE AUDITS AND THE
16	CONTROLLER, AND WENT THROUGH THOSE WITH FLYING
17	COLORS.
18	AND FURTHERMORE, AS WAS MENTIONED EARLIER,
19	THE AGENCY IS IN THE PROCESS OF COMMISSIONING AN
20	EXTERNAL SCIENTIFIC REVIEW. SO TO IMPOSE ANOTHER
21	PERFORMANCE AUDIT ON TOP OF THE AUDITS THAT CIRM IS
22	ALREADY SUBJECT TO WOULD OBVIOUSLY INVOLVE
23	ADDITIONAL COST OF BSA AUDITS PLUS \$200,000 FOR BSA
24	TO CONDUCT AND ANOTHER 200,000 OF CIRM FUNDS AS WELL
25	AS THE INCREDIBLE AMOUNT OF STAFF TIME THAT REALLY
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1	DISTRACTS THE STAFF FROM FOCUSING ON THE AGENCY'S
2	CRITICAL MISSION.
3	THE BILL ALSO PROPOSES TO REALLOCATE SOME
4	OF THE DUTIES OF THE CHAIR TO THE PRESIDENT.
5	SPECIFICALLY IT WOULD ELIMINATE THE CHAIR'S
6	RESPONSIBILITY ON BEHALF OF THE BOARD FOR PROVIDING
7	OVERSIGHT OF THE AGENCY'S COMPLIANCE WITH PUBLIC
8	ACCOUNTABILITY LAWS, CONFLICT OF INTEREST LAWS,
9	PUBLIC MEETING LAWS, PUBLIC RECORD LAWS, COMPETITIVE
10	BIDDING LAWS, AND INTELLECTUAL PROPERTY STANDARDS.
11	AND IT WOULD ALSO TRANSFER FROM THE CHAIR
12	INTELLECTUAL PROPERTY NEGOTIATIONS TO THE PRESIDENT.
13	CURRENTLY THE WAY PROPOSITION 71 WAS DESIGNED
14	NEGOTIATIONS ARE IN THE HANDS OF THE CHAIR.
15	EXECUTION OF THE AWARDS IS IN THE HANDS OF THE
16	PRESIDENT, AND THERE'S A CHECK AND ADDITIONAL LAYERS
17	OF PROTECTION TO PROTECT THE PUBLIC INTEREST.
18	THE BILL WOULD ELIMINATE THE
19	PREAPPLICATION REVIEW PROCESS. WE'VE DISCUSSED THIS
20	BEFORE AND, IN FACT, THE BOARD HAS SET UP A
21	SCIENTIFIC ISSUES SUBCOMMITTEE TO TAKE A CLOSER LOOK
22	AT THAT PROCESS TO DETERMINE WHETHER IMPROVEMENTS
23	COULD BE MADE TO IT.
24	IT WOULD ELIMINATE THE CAP OR PURPORTS TO
25	ELIMINATE THE CAP ON SCIENTISTS SERVING ON THE
	124

1	GRANTS WORKING GROUP. WE'VE ADDRESSED THIS ISSUE IN
2	THE PAST AS WELL, AND THE STAFF HAS MADE VERY CLEAR
3	THAT THE LIMIT ON SCIENTISTS ON THE GRANTS WORKING
4	GROUP DOES NOT ACT AS A BARRIER TO THE AGENCY'S
5	ABILITY TO EXPEDITIOUSLY REVIEW THE GRANTS. AND, IF
6	ANYTHING, ADDING MEMBERS MIGHT ACTUALLY INCREASE THE
7	TIME IT TAKES TO REVIEW GRANTS BECAUSE WE'D HAVE TO
8	ACCOMMODATE ADDITIONAL POINTS OF VIEW, WHICH WITH A
9	29-MEMBER BOARD, I'M SURE YOU CAN APPRECIATE.
10	AND, FINALLY, THE BILL WOULD, AS THE
11	SENATE BILL 1565 DID, TAKE CIRM'S INTELLECTUAL
12	PROPERTY REGULATIONS WHICH RELATE TO ACCESS TO
13	UNINSURED CALIFORNIANS AS WELL AS A PRICING
14	MECHANISM FOR STATE- AND LOCAL-GOVERNMENT FUNDED
15	PROGRAMS AND PLACE THOSE IN STATUTE. CURRENTLY THE
16	BOARD HAS THE AUTHORITY TO STRIKE A BALANCE TO
17	ENSURE THAT CALIFORNIANS RECEIVE SOME BENEFIT FROM
18	THEIR INVESTMENT IN STEM CELL RESEARCH WITH THE NEED
19	TO ENSURE THAT THE DEVELOPMENT OF THERAPIES IS NOT
20	UNNECESSARILY HINDERED.
21	THIS BILL WOULD REMOVE THAT AUTHORITY AND
22	PLACE THE REGULATIONS IN A STATUTE. AND IN LIGHT OF
23	THE UNCERTAIN HEALTHCARE DEBATE IN THIS COUNTRY, THE
24	EARLY STAGES OF DEVELOPMENT OF STEM CELL THERAPIES
25	GENERALLY, IT POSES SIGNIFICANT CHALLENGES TO THE

1	AGENCY TO MAKE SURE THAT THAT BALANCE IS
2	MR. TORRES: THANK YOU. MR. CHAIRMAN, I
3	MOVE THAT WE RECOMMEND THAT THIS SENATE BILL GO TO
4	INTERIM STUDY. I'D LIKE TO HAVE A SECOND ON THAT.
5	MR. ROTH: SECOND.
6	MR. TORRES: SECOND BY DUANE ROTH.
7	LET ME EXPLAIN TO YOU WHAT THAT MEANS.
8	RATHER THAN ENGAGE IN A PROCESS WHERE WE BECOME
9	ADVERSARIES, WHICH I DON'T THINK ANY OF US WANT TO
10	DO, THE LEGISLATURE PROVIDES FOR AN OPPORTUNITY
11	WHERE THERE ISN'T SIGNIFICANT SUPPORT OR A MAJOR
12	OPPOSITION TO LEGISLATION TO ALLOW IT TO GEL IN
13	WHAT'S CALLED INTERIM STUDY WHERE THE CHAIR OF THAT
14	POLICY COMMITTEE CAN HOLD A HEARING TO FLESH OUT
15	JUST WHAT THE ISSUES ARE.
16	I DO NOT THINK THAT THE STAFF OF THIS
17	COMMITTEE HAS HAD THE TIME TO DO THAT. AND I WOULD
18	RATHER EMBRACE THE OPPORTUNITY FOR AN OVERSIGHT
19	HEARING SO WE CAN PUT ON THE RECORD HOW MUCH WE HAVE
20	COMPLIED WITH SO MANY OF THESE ISSUES AND OF THESE
21	AUDITS. AND QUITE FRANKLY, I THINK IT'S
22	DISINGENUOUS THAT THE LEGISLATURE DOESN'T HAVE AN
23	APPROPRIATION WHICH WOULD IMMEDIATELY PUT INTO
24	SUSPENSE FOR AT LEAST THE 200,000 THAT IT COSTS THE
25	STATE BOARD OF AUDIT TO EXPEND IN ADDITION TO THE
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1	200,000 THAT WE HAVE TO EXPEND TO CONDUCT ONE AUDIT,
2	ONE AUDIT.
3	IT'S ALSO CLEAR THAT NO ONE HAS READ THIS
4	2006 SCIENTIFIC STRATEGY PLAN, STRATEGIC PLAN, THAT
5	WAS IMPLEMENTED BEFORE YOUR ARRIVAL ON OUR PACIFIC
6	SHORES, THESE PACIFIC SHORES. AND IT WAS AMENDED
7	AGAIN IN 2009. AGAIN, NO ONE READ IT. AND THEREIN
8	THAT LANGUAGE IS A SCIENTIFIC REVIEW OF SUBSTANCE OF
9	WHAT WE'RE DOING, WHERE WE'RE GOING, AND HOW WE'RE
10	GOING TO ACHIEVE IT. SO I BELIEVE THIS IS THE MORE
11	APPROPRIATE WAY TO GO, AND I WILL CONTINUE TO ARGUE
12	THAT WITH MEMBERS OF THE SENATE HEALTH COMMITTEE.
13	MR. KLEIN.
14	CHAIRMAN KLEIN: YES. JUST AS AN
15	ADDITIONAL COMMENT ON WHAT MR. HARRISON'S STATEMENTS
16	WERE. I'D LIKE TO POINT OUT THAT IN THE BILL AS
17	WRITTEN IT ATTEMPTS TO OVERRIDE THE SPECIFIC
18	PROVISION IN THE INITIATIVE THAT CALLS FOR LOAN
19	PROCEEDS TO BE COLLECTED AND REINVESTED IN LOANS AND
20	GRANTS BY REFERRING TO THESE AS BEING SUBJECT TO
21	INTELLECTUAL PROPERTY AGREEMENT AND THEN SAYING ALL
22	REVENUES FROM INTELLECTUAL PROPERTY AGREEMENTS GO TO
23	THE STATE'S GENERAL FUND.
24	CLEARLY THE INITIATIVE STATES REVENUES
25	FROM INTELLECTUAL PROPERTY AGREEMENTS, FROM IP
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1	ROYALTIES, AND LICENSING FEES GO BACK TO THE STATE,
2	BUT LOAN PROCEEDS COULDN'T BE RECYCLED.
3	NO. 2, I'D POINT OUT THAT IT IS VERY
4	IMPORTANT TO UNDERSTAND THAT TRANSFERRING THE BOARD
5	LEVEL OVERSIGHT OF CONFLICTS AND ACCOUNTABILITY TO
6	THE PRESIDENT WOULD PUT THE PRESIDENT IN THE
7	UNENVIABLE SITUATION OF HAVING TO REPORT ON THE
8	PEOPLE THAT HIRE HIM. IT'S KIND OF AN ILLOGICAL
9	REALLOCATION OF RESPONSIBILITY.
10	THERE'S A CONSTITUTIONAL STANDARD HERE.
11	YOU CAN'T PIECEMEAL GO THROUGH AND JUST DECIDE HOW
12	YOU WOULD HAVE WRITTEN THE INITIATIVE. THE
13	INITIATIVE WAS VOTED ON BY 7 MILLION PEOPLE. THE
14	SUPREME COURT SAYS THIS IS A PRECIOUS RIGHT OF THE
15	PUBLIC. IF YOU CONSTITUTIONALLY CAN CHANGE
16	RESPONSIBILITIES IN THIS BILL, YOU CAN THEN
17	THEORETICALLY CONSTITUTIONALLY, BECAUSE YOU HAVE A
18	PRECEDENT, CHANGE ANYTHING IN THE INITIATIVE.
19	SO IT'S VERY IMPORTANT TO RESPECT THAT AND
20	UNDERSTAND WE HAVE A HISTORY IN 2005 AND 2006 OF
21	SITTING WITH THE LEGISLATURE, TAKING THEIR INPUT,
22	WORKING WITH THEM, PUTTING INTO OUR BYLAWS
23	PROVISIONS THAT THE LEGISLATURE SUGGESTED, AND WE
24	CANNOT CHANGE THOSE PROVISIONS WITHOUT A VOTE AND A
25	PUBLIC REPORT IN ADVANCE TO THE LEGISLATURE SO THEY
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1	CAN DECIDE AT THAT TIME TO TAKE ACTION IF THEY NEED
2	TO.
3	MR. TORRES: THANK YOU, MR. KLEIN. MS.
4	LANSING.
5	MS. LANSING: I AGREE TOTALLY WITH YOUR
6	SUGGESTION, ART. I THINK IT'S THE RIGHT ONE. I
7	THINK IT'S THE FAIR ONE. AND ALSO I WANT TO JUST
8	SAY FOR THE RECORD SHOULD WE FIND A WAY TO IMPROVE
9	OURSELVES AND TO BETTER OURSELVES, WE WILL OPEN IT
10	AND EMBRACE IT AS WELL. SO I THINK THIS IS A VERY
11	GOOD PROCESS FOR BOTH SIDES TO GO THROUGH.
12	MR. TORRES: THANK YOU, SHERRY. MR. ROTH.
13	MR. ROTH: CALL THE QUESTION.
14	MR. TORRES: QUESTION HAS BEEN CALLED FOR.
15	ARE THERE PUBLIC COMMENTS? NO PUBLIC COMMENT. CALL
16	THE ROLL, PLEASE. ALL THOSE IN FAVOR SIGNIFY BY
17	SAYING AYE.
18	(CHORUS OF AYES.)
19	MR. TORRES: TELEPHONE.
20	MS. KING: AND I WILL JUST CHECK. I KNOW
21	MS. SAMUELSON HAD TO LEAVE US.
22	MR. SHESTACK: AYE.
23	MS. KING: THANK YOU. MR. SHESTACK'S VOTE
24	IS AYE.
25	MR. TORRES: ANY OPPOSED? SILENCE IS
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1	GOLDEN.
2	ALL RIGHT. WE'LL MOVE ON. THAT MOTION
3	CARRIES.
4	THE NEXT LEGISLATION, I HAD ASKED
5	ASSEMBLYMEMBER PORTANTINO NOT TO COME, ALTHOUGH HE
6	WANTED TO, AND I WANT TO THANK HIM FOR HIS
7	GRACIOUSNESS FOR AGREEING TO, AND THAT'S AB 52.
8	MR. HARRISON.
9	MR. HARRISON: AB 52 IS A BILL THAT WOULD
10	ESTABLISH AN UMBILICAL CORD BLOOD PROGRAM IN THE
11	STATE OF CALIFORNIA. UNDER EXISTING LAW, THE
12	DEPARTMENT OF PUBLIC HEALTH IS REQUIRED TO ESTABLISH
13	SUCH A PROGRAM. BUT THE DEPARTMENT OF PUBLIC HEALTH
14	CURRENTLY ADMINISTERS 300 OTHER PROGRAMS, AND THEY
15	HAVE EXPRESSED SOME RELUCTANCE TO ADMINISTERING THIS
16	PROGRAM.
17	IT WOULD BE FUNDED BY THE ADDITION OF \$2
18	TO THE CURRENT \$7 FEE ON COPIES OF DUPLICATE BIRTH
19	CERTIFICATES. THE REVENUES FROM THAT \$2-INCREASE IN
20	THE FEE WOULD GO TO THE UMBILICAL CORD BLOOD
21	COLLECTION PROGRAM FUND. THE AUTHOR HAS PROPOSED
22	THAT CIRM MIGHT BE AN APPROPRIATE PLACE TO HOUSE AND
23	TO ADMINISTER THE PROGRAM.
24	AND AT THE LEGISLATIVE SUBCOMMITTEE, THE
25	ASSEMBLYMEMBER MADE A PRESENTATION, AND CHAIR OF THE
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1	LEGISLATIVE SUBCOMMITTEE, VICE CHAIR TORRES,
2	RECOMMENDED THAT STAFF BE REQUESTED TO CONDUCT AN
3	ANALYSIS OF THE ALTERNATIVES AVAILABLE TO ADVANCE
4	THE GOALS OF THE PROGRAM, NOT NECESSARILY HOUSING IT
5	WITHIN CIRM, BUT THOSE WOULD INCLUDE SCIENTIFIC
6	ISSUES, PROGRAMMATIC ISSUES, AND ADMINISTRATIVE
7	ISSUES, AND LIABILITY ISSUES.
8	MR. TORRES: SO THE MOTION WAS, IN
9	CONSULTATION WITH MR. ROTH AND ALSO IN MY
10	CONVERSATIONS WITH BLOOD BANKS ACROSS THE STATE,
11	ESPECIALLY IN SAN DIEGO, WERE THAT THERE ARE SO MANY
12	COMPLEX ISSUES INVOLVED IN ESTABLISHING A STATEWIDE
13	CORD BLOOD BANK, NOT THE LEAST OF WHICH IS SOME
14	PEOPLE ARGUE THAT WE SHOULD ONLY HAVE A NATIONAL
15	CORD BLOOD BANK, OUR THOUGHTS IN CONSULTATION WITH
16	PRESIDENT TROUNSON WAS TO COME UP WITH A CONCEPT
17	WHERE THE STAFF WOULD LOOK INTO ALL OF THE ISSUES,
18	LIABILITY ISSUES, SUBSTANTIVE ISSUES, LOGISTIC
19	ISSUES, FINANCIAL ISSUES, AND SEE WHETHER OR NOT AT
20	SOME POINT WE MIGHT DECIDE RATHER THAN HOUSE THIS,
21	AS MR. PORTANTINO DOESN'T PRESENTLY PROPOSE, BUT
22	MIGHT, HOUSE THIS HAVE AN RFA PUT OUT TO SUGGEST
23	WHAT'S OUT THERE AND SEE WHAT KIND OF RESPONSE WE
24	MIGHT GET.
25	FIRST LET'S DO OUR HOMEWORK AS TO WHAT THE
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1	VARIABLES ARE. SO THAT WAS MY MOTION, WHICH WAS
2	ACCEPTED BY THE LEGISLATIVE SUBCOMMITTEE. AND I SO
3	MOVE. IS THERE A SECOND?
4	MS. LANSING: SECOND.
5	MR. TORRES: SECOND BY MS. LANSING.
6	PRESIDENT TROUNSON, YOUR RESPONSE.
7	DR. TROUNSON: WELL, YOU KNOW, I THINK YOU
8	REQUESTED US TO DO THIS WITHIN THREE TO FIVE MONTHS.
9	AT THREE MONTHS I THINK WE WERE TO GIVE YOU A REPORT
10	ON PROGRESS. AND WE'VE STARTED A DISCUSSION ABOUT
11	WHERE THOSE RESOURCES CAN BE FOUND TO INVESTIGATE
12	THIS.
13	IT'S A PRETTY SUBSTANTIVE ISSUE. AND SO I
14	DON'T WANT TO SORT OF SAY THAT THIS IS AN EASY
15	PROCESS, BUT I THINK WE HAVE AN IDEA OF HOW WE
16	SHOULD GO ABOUT IT, AND WE'LL KEEP YOU INFORMED AS
17	WE MOVE FORWARD ABOUT WHEN WE CAN ACTUALLY DELIVER
18	THE FINAL SET OF RECOMMENDATIONS OR WHITE PAPER TO
19	YOU TO CONSIDER.
20	MR. TORRES: THANK YOU, MR. PRESIDENT. AS
21	YOU CAN SEE FROM THE BILL, MEMBERS, IT HAS
22	BIPARTISAN SUPPORT, AND THAT'S WHY WE FELT IT WAS
23	IMPORTANT TO GIVE IT SERIOUS CONSIDERATION. I THINK
24	THIS FALLS IN THAT SUBSTANTIVE DIRECTION.
25	CALL FOR THE I'M SORRY. THE MOTION IS
	100

1	TO DIRECT THE STAFF UNDER THE LEADERSHIP OF DR.
2	TROUNSON TO REVIEW ALL THE ISSUES INVOLVED IN THE
3	ESTABLISHMENT OF A STATE CORD BLOOD BANK IN
4	CALIFORNIA AND WHETHER OR NOT WE SHOULD PROCEED TO
5	PERHAPS ISSUE AN RFA TO DO SO. NOT TO HOUSE IT
6	WITHIN CIRM BECAUSE WE'RE NOT CAPABLE OF DOING THAT,
7	BUT WHETHER WE SHOULD PROCEED OUTSIDE TO HAVE
8	SOMEONE ELSE APPLY IN RESPECT TO AN RFA THAT MAY OR
9	MAY NOT BE ISSUED, DEPENDENT ON THEIR
10	RECOMMENDATION, WITHIN THREE TO FIVE MONTHS.
11	ANY OPPOSITION OR PUBLIC COMMENT RATHER?
12	MS. GIBBONS: WITHOUT A RESCUE FROM CIRM
13	OR SOME OTHER OUTSIDE INTERVENTION THAT MAY COME
14	FROM THIS RFA, THIS PROGRAM IS LIKELY TO GO AWAY; IS
15	THAT A CORRECT UNDERSTANDING?
16	MR. TORRES: NO. IT'S NOT LIKELY TO GO
17	AWAY. THERE ARE SOME BLOOD BANKS THAT ARE LOOKING
18	INTO IT IN A LOCAL AREA. FOR EXAMPLE, SAN DIEGO DID
19	START THIS EFFORT, THEN RECEDED BACK, NOW THEY'RE
20	LOOKING AT IT AGAIN, WHETHER TO DO IT ON THEIR OWN.
21	OUR INTERESTS MAY SPARK MORE INTEREST FROM OTHER
22	AREAS OR OTHER BLOOD BANKS IN CALIFORNIA.
23	THE OTHER NOTION IS THAT THIS MAY NOT BE
24	JUST ONE PROJECT OR ONE BLOOD BANK COMING FORWARD
25	AND SAY WE WANT TO APPLY. IT MAY BE ONE OR THREE OR

1	FOUR, NOT NECESSARILY JUST ONE STATE CORD BLOOD
2	BANK.
3	CHAIRMAN KLEIN: ART, IF I UNDERSTOOD
4	CORRECTLY, AS WELL TO LEGISLATIVE SUBCOMMITTEE, THE
5	RECOMMENDATION RANGE COULD INCLUDE OUR AGENCY ON A
6	CONTRACT BASIS OVERSEEING AND MONITORING THIS AS
7	LONG AS THERE'S SUFFICIENT REVENUE AND STAFFING TO
8	CARRY OUT THAT FUNCTION.
9	SO THIS IS STAFFING THAT WOULD OCCUR
10	OUTSIDE OF OUR CURRENT CAP AND REVENUE FROM OUTSIDE
11	OF OUR CURRENT CAP BECAUSE IT IS A SEPARATE FUNCTION
12	THAT WOULD BE SUPPORTED BY LEGISLATION AUTHORIZING
13	THAT SEPARATE FUNCTION.
14	SO THERE'S A RANGE OF POSSIBILITIES FOR
15	THE STAFF TO LOOK AT. MY UNDERSTANDING IS THEY'RE
16	LOOKING AT THE FULL RANGE.
17	MS. LANSING: I JUST WANT TO ADD THAT THIS
18	IS WHY IT'S SUCH A WONDERFUL STAFF. THEY'RE GOING
19	TO LOOK AT IT, THEY'RE GOING TO TELL US WHAT'S
20	FEASIBLE, WHAT'S NOT FEASIBLE. IF YOU NEED MORE
21	TIME, BECAUSE I SENSED IN YOUR VOICE THAT THIS THREE
22	TO FIVE MONTHS WAS MAKING YOU VERY NERVOUS, THEN YOU
23	WILL COME BACK TO US AND SAY I NEED SIX MONTHS.
24	BECAUSE WE WANT YOU TO DO A THOROUGH STUDY. WE WANT
25	WHAT'S IN THE BEST INTEREST OF EVERYONE. I'M VERY
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1	COMFORTABLE WITH A STUDY OF THIS, AND I DON'T KNOW
2	WHAT'S GOING TO COME BACK. NONE OF US DO.
3	MR. TORRES: ANY OTHER COMMENTS FROM
4	MEMBERS OF THE BOARD? ANY PUBLIC COMMENT? SEEING
5	NONE, WE'LL CALL THE ROLL. ALL THOSE IN FAVOR
6	SIGNIFY BY SAYING AYE.
7	(CHORUS OF AYES.)
8	MR. TORRES: ALL THOSE OPPOSED? MEMBERS
9	ON THE
10	MS. KING: JON SHESTACK, YOUR VOTE PLEASE.
11	IT APPEARS THAT MR. SHESTACK MAY HAVE LEFT US, BUT
12	WE DO HAVE A QUORUM WITHOUT HIM, SO THAT MOTION
13	CARRIES.
14	MR. TORRES: LASTLY, I JUST WANT TO THANK
15	THE MEMBERS OF THE LEGISLATIVE SUBCOMMITTEE FOR YOUR
16	TREMENDOUS INVOLVEMENT AND INPUT. AND ALSO TO EACH
17	OF THE BOARD MEMBERS ON THIS HISTORIC VISIT TO THE
18	CAPITOL. I THINK EACH OF YOU REALLY HAVE DONE AN
19	INCREDIBLE JOB OF VISITING WITH LEGISLATORS, GETTING
20	THEIR PERSPECTIVES. I'M SORRY NOT MANY OF THEM HAVE
21	COME IN HERE TODAY BECAUSE THEY ARE IN SESSION, BUT
22	I KNOW SOME OF YOU HAVE MEETINGS THIS AFTERNOON AS
23	WELL. SO GOD SPEED AND THANK YOU. MR. CHAIRMAN.
24	CHAIRMAN KLEIN: SO WE ARE NOW GOING TO
25	ADJOURN TO AN EXECUTIVE SESSION. AND WHAT ARE THE
	135

1	INSTRUCTIONS ON THE LOCATION OF THAT EXECUTIVE
2	SESSION?
3	MS. KING: SO THE EXECUTIVE SESSION IS
4	GOING TO BE IN ROOM 447 IN THE RESTORED SIDE OF THE
5	BUILDING.
6	CHAIRMAN KLEIN: AND WHO WILL LEAD US TO
7	THAT? JENNA PRYNE WILL LEAD US TO THE EXECUTIVE
8	SESSION.
9	MR. HARRISON, IF YOU COULD READ OR RECITE
10	THE STATUTORY AUTHORIZATION FOR THE EXECUTIVE
11	SESSION AFTER MELISSA KING FINISHES HER COMMENT.
12	MS. KING: LUNCH IS ALSO PREPARED FOR THE
13	BOARD MEMBERS, AND THAT IS ALSO ON THE RESTORED SIDE
14	OF THE BUILDING. I'M JUST GOING TO SUGGEST, I KNOW
15	PEOPLE ARE GETTING HUNGRY, THAT FOLLOWING THE
16	EXECUTIVE SESSION, THE BOARD COULD GO TO LUNCH.
17	UNFORTUNATELY WE CAN'T DO IT BEFORE BECAUSE WE CAN'T
18	EAT IN THE ROOM WHERE WE'RE DOING THE CLOSED SESSION
19	AND THERE'S NO PLACE WHERE WE CAN EAT THAT IS A
20	PRIVATE ROOM. SO I JUST WANT TO SUGGEST THAT WE GO
21	TO LUNCH IMMEDIATELY FOLLOWING THAT INSTEAD OF
22	COMING BACK HERE.
23	CHAIRMAN KLEIN: TAKE YOUR MATERIALS WITH
24	YOU. MR. HARRISON, COULD YOU PLEASE GIVE US THE
25	STATUTORY AUTHORITY.
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1	MR. HARRISON: THE BOARD WILL BE MEETING
2	IN CLOSED SESSION TO DISCUSS PERSONNEL PURSUANT TO
3	HEALTH AND SAFETY CODE SECTION 125290.30 AND
4	GOVERNMENT CODE SECTION 11126.
5	(THE MEETING WAS THEN ADJOURNED AT 12:56 P.M.)
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REPORTER'S CERTIFICATE

I, BETH C. DRAIN, A CERTIFIED SHORTHAND REPORTER IN AND FOR THE STATE OF CALIFORNIA, HEREBY CERTIFY THAT THE FOREGOING TRANSCRIPT OF THE PROCEEDINGS BEFORE THE INDEPENDENT CITIZEN'S OVERSIGHT COMMITTEE OF THE CALIFORNIA INSTITUTE FOR REGENERATIVE MEDICINE IN THE MATTER OF ITS REGULAR MEETING HELD AT THE LOCATION INDICATED BELOW

STATE CAPITOL BUILDING ROOM 4202 SACRAMENTO, CALIFORNIA ON MARCH 11, 2010

WAS HELD AS HEREIN APPEARS AND THAT THIS IS THE ORIGINAL TRANSCRIPT THEREOF AND THAT THE STATEMENTS THAT APPEAR IN THIS TRANSCRIPT WERE REPORTED STENOGRAPHICALLY BY ME AND TRANSCRIBED BY ME. I ALSO CERTIFY THAT THIS TRANSCRIPT IS A TRUE AND ACCURATE RECORD OF THE PROCEEDING.

BETH C. DRAIN, CSR 7152 BARRISTER'S REPORTING SERVICE 1072 BRISTOL STREET SUITE 100 COSTA MESA, CALIFORNIA (714) 444-4100